Image# 15951393110 PAGE 1 / 320

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

										Office Us	e Only	
1.	NAME OF COMMITTEE (in f		PE OR P	RINT ▼		mple: If typi r the lines.	ng, type	12FE	4M5			
, W	omen Speak	Out PAC										1
Ш												
ADI	DRESS (number and		1200 New	Hampshire A	ve NW							
V	, manibol and	,	Suite 750									
	Check if diffe than previous	L.	Washington DC 20036									
	reported. (AC								L			
2.	FEC IDENTIFICA	ATION NUME	BER ▼		CITY 🛦			STATE A	L		ZIP COI	DE 🛦
	C C00530766			3	B. IS THIS REPORT		NEW (N) OR	×	AME (A)	NDED		
4.	TYPE OF REP (Choose One)	ORT	(b) Mont Repo	ort 🔲	Feb 20 (M2)		May 20 (M5)		Aug 20	O (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Repo	orts:	Due		Mar 20 (M3)		Jun 20 (M6)		Sep 20	0 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15			Ш	Apr 20 (M4)		Jul 20 (M7)	Ш	Oct 20	(M10)	Ш	Jan 31 (YE)
	July 15	Report (Q1)		12-Day		Primary (12F	P)	Ge	neral (1	2G)		Runoff (12R)
	Quarterly	Report (Q2)		PRE-Election Report for th		Convention ((12C)	Spe	ecial (12	2S)		
	October 1 Quarterly	15 Report (Q3)										
	January 3 Year-End	31 Report (YE)		EI	ection on	M M /	D D /	Y	Y Y		in the State of	
	July 31 M	lid-Year lon-election		30-Day POST-Election		General (300	G)	Rui	noff (30	R)		Special (30S)
		on Report		Report for th	e:	M M /	D D /	Y = Y =	Y		in the	
	(TER)			El	ection on						State of	
5.	Covering Period	11	17		14	through	M M	/ D 24	D /	201	Y Y 4	
l ce	ertify that I have ex	amined this F	Report ar	nd to the bes	st of my kno	wledge and	belief it is tru	ie, corre	ct and	complet	e.	
Тур	e or Print Name of	Treasurer	Ms. Emily	Buchanan								
Sig	nature of Treasurer	Ms. Emily	y Buchana	n		[Electronicall	y Filed]	Date	M M M	/ D	D /	2015
NO.	TE: Submission of fa	ılse, erroneous	s, or inco	mplete inform	nation may su	ıbject the per	son signing tl	nis Repor	t to the	penaltie	es of 2 L	J.S.C. §437g.
	Office									FEC	FOR	M 3X
	Use Only										ev. 12/20	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Women Speak Out PAC 2014 24 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1842.48 January 1, 2014 (b) Cash on Hand at 397553.16 Beginning of Reporting Period..... 3682448.71 34065.49 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 431618.65 3684291.19 6(a) and 6(c) for Column B)..... 60130.23 3312802.77 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 371488.42 371488.42 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Women	Speak	Out	PAC

I. Receipts Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Individuals/Persons Other Than Political Committees		
Than Political Committees		
(i) Itomizad (usa Sahadula A)	40475.00	3507449.09
(i) iternized (use scriedule A)	16475.00	3507449.08
(ii) Unitemized	17590.49	104999.62
	7	
Lines 11(a)(i) and (ii)▶	34065.49	3612448.71
B. III. 1 B. 1 B. 1 B. 1	0.00	0.00
	0.00	0.00
	0	70000
· ·		10000
•		
	34065.49	3682448.71
	0.00	0.00
Loans Received	0	0.00
an Repayments Received	0.00	0.00
· ·		7
arry Totals to Line 37, page 5)	0	0
funds of Contributions Made		
Federal Candidates and Other		
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·		
	0.00	0.00
	0.00	0.00
(Irom Scriedule H3)	0.00	0.00
Lovin Funds (from Schodulo H5)	0.00	0.00
Leviii i diida (iioiii ocheddie 115)		
Total Transfers (add 18(a) and 18(b))	0	
	Political Party Committees Other Political Committees (such as PACs)	Ciii) TOTAL (add Lines 11(a)(i) and (ii) Add Add Lines 11(a)(i) and (ii) Add Add

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Carolinai Tour to Buto
	(i) Federal Share	0.00	0.00
		0.00	
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	25967.46	1232317.74
	(c) Total Operating Expenditures	7	
	(add 21(a)(i), (a)(ii), and (b))▶	25967.46	1232317.74
	Transfers to Affiliated/Other Party		
	Contributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	0	3000
	Independent Expenditures	34162.77	2077485.03
	(use Schedule E)		2511100.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	man Political Committees	0.00	3.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0	0
	i		
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) Federal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	60130.23	3312802.77
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	60130.23	3312802.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	34065.49	3682448.71		
4. Total Contribution Refunds (from Line 28(d))	0	0		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34065.49	3682448.71		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	25967.46	1232317.74		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	0		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	25967.46	1232317.74		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

FOR	LINE	NU	MBER	:	PAGE	:	6	OF	320	
(che	ck only	or	ne)							
X	11a		11b		11c		12			
	13		14		15		16	,	17	

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Women Speak Out PAC		
Full Name (Last, First, Middle Initial) Thomas Posatko Mailing Address 507 West 9th Street		Date of Receipt
City Wilmington	State Zip Code DE 19801	11 24 2014 Transaction ID: 58-AD63-3472AC066158 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Retired Receipt For: Primary General Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Robert Michalewicz Mailing Address 337 Michalewicz Road		Date of Receipt 11 17 2014
City Best	State Zip Code TX 76932	Transaction ID : 75-BDFF-6B306945438A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Self-Employed Receipt For:	Occupation Rancher	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 2. Paul McFadden		Date of Receipt
Mailing Address 9504 Indianfield Drive City	State Zip Code	11 17 2014
Mechanicsville	VA 23116	Transaction ID: 79-BCCE-3B14F6A486A8 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer Retired	Occupation Retired	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: **PAGE** 7 OF 320 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) John Hoch Date of Receipt Mailing Address 580 West 215th Street Apt. 4a 2014 City Zip Code State Transaction ID: B1-AB3C-82FB7863BEB5 NY New York 10034 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** John Valerius Date of Receipt Mailing Address 1909 Canterbury Street 17 11 2014 City State Zip Code Transaction ID: 10-9E8C-229C37C1405E TX Irving 75062 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Henry Davison Date of Receipt Mailing Address 7821 Buist Avenue 19 2014 City State Zip Code Transaction ID: A5-AD62-B34279183569 PΑ Philadelphia 19153 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation SSA Civil Servant Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE	NUMBER:	PAGE	= 8 (J⊢
Use separate schedule(s)	(check onli	y one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
,	13	14	15	16	

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Women Speak Out PAC		
Full Name (Last, First, Middle Initial) George Bridgman Mailing Address 1092 87th Avenue West		Date of Receipt
City Duluth FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code MN 55808 C Occupation Retired Aggregate Year-to-Date ▼ 300.00	Transaction ID: 3D-8EE7-8103D49928DA Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Stephen Good Mailing Address 3304 Grand Avenue City Everett FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code WA 98201 C Occupation Retired Aggregate Year-to-Date ▼ 225.00	Date of Receipt 11 17 2014 Transaction ID: 3B-8E51-D4EAF42EEBEE Amount of Each Receipt this Period 225.00
Full Name (Last, First, Middle Initial) Ralph Schmidt Mailing Address 2925 Piano Bridge Road City Schulenburg FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code TX 78956 C Occupation Retired Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 11 17 2014 Transaction ID: FA-BBF9-771B2A08D7E1 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	>	1525.00
TOTAL This Period (last page this line numbe	r only)	

•	EMIZED RECEIPTS		Detailed Summary Page	X	11a 13		11 14	-	11c		12 16	☐ ₁₇				
	ly information copied from such Reports and State for commercial purposes, other than using the n				or the		oos	e of	solicitin		ntributi	ions				
\rangle	NAME OF COMMITTEE (In Full) Women Speak Out PAC															
١.	Full Name (Last, First, Middle Initial) Lawrence Rakunas				ate of	Re	cei	pt								
	Mailing Address 1150 Willowgate Lane				M = M	/		17	/ Y		014	Y				
	City	State	Zip Code		Trans	acti	ion	ID : A	A3-A93	C-A1	9AE4	E22FBC				
	Saint Charles	IL	60174		mount	of	Ea	ch Re	eceipt tl	nis P	'eriod					
	FEC ID number of contributing federal political committee.	С				_	7		7	Ξ	300.	00				
	Name of Employer	Occupation														
	Northwest Airlines	Retired														
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		300.00													
3.	Full Name (Last, First, Middle Initial) Pamela Gilardi				ate of	Re	cei	pt								
	Mailing Address 105 Due East Avenue		11 21 2014													
	City	State	Zip Code 32169		Transa	acti	on	ID : C	1-9195	-B78	3E5E2	61EB4				
	New Smyrna Beach	FL	A	mount	of	Ea	ch Re	eceipt tl	nis P	'eriod						
	FEC ID number of contributing federal political committee.								1000.00							
	Potirod	Occupation Retired														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00													
).	Full Name (Last, First, Middle Initial) Nancy Reed				ate of	Re	cei	pt								
	Mailing Address 2201 E Hickory Hill Road				M = M	/		17	/ Y)14	Y				
	City Argyle	State TX	Zip Code 76226	A					34-9553 eceipt tl			DCA7D				
	FEC ID number of contributing federal political committee.	С		[7			_	1000.	00				
	Name of Employer	Occupation														
	Retired	Retired														
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		1000.00													
s	UBTOTAL of Receipts This Page (optional)						7			_	2300.0	00				
Т	OTAL This Period (last page this line number or	nly)					1									

FOR LINE NUMBER: PAGE 10 OF 320 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Mary Murphy Date of Receipt Mailing Address 46 Central Drive 20 2014 City Zip Code State Transaction ID: DA-9FCC-78DA9DA599BC NY Plandome 11030 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Josephine Noetzel Date of Receipt Mailing Address 238 Surrey Lane 11 17 2014 City State Zip Code Transaction ID: 53-842F-CE7BCCBC1497 IL Lake Forest 60045 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Deloitte Mgmt Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carol Crossed Date of Receipt Mailing Address 1675 Clover Street 24 2014 City Zip Code State Transaction ID: C2-81FD-11FD1EAE910F NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 С federal political committee. Name of Employer Occupation President, SBA Museum Seamless Garment Network Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 11 OF 320 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) Anne Perri Date of Receipt Mailing Address 4975 Southwest 65th Avenue 2014 City Zip Code State Transaction ID: 89-B08F-53725CA54E5D OR Portland 97221 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Best Buy In Town, Inc. Secretary/Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rosemary Perez Date of Receipt Mailing Address 6822 Oregon Street 20 11 2014 City State Zip Code Transaction ID: E7-BA94-779B2FC1D07B Buena Park CA 90621 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation St. Joseph Hospital Mammographer Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Elaine Moczygemba Date of Receipt Mailing Address 452 K D M Lane 17 2014 City Zip Code State Transaction ID: A9-8E54-9D6BBF46529C TX Hobson 78117 Amount of Each Receipt this Period FEC ID number of contributing C 400.00 federal political committee. Name of Employer Occupation **Dry-Land Farmer** Self-Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 2400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 12 OF 320 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Women Speak Out PAC Full Name (Last, First, Middle Initial) David Ream Date of Receipt Mailing Address 19514 Orrick Trail 2014 City Zip Code State Transaction ID: DD-9B35-F6002C8972EE MO Kirksville 63501 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Self-Employed Clergyman Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Anthony Dimaggio Date of Receipt Mailing Address 28001 Southfield Road 20 11 2014 City State Zip Code Transaction ID: F1-9CCE-E5F2F7907C3C Lathrup Village MI 48076 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **General Motors** Engineer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... 16475.00 TOTAL This Period (last page this line number only).....

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S	CHEDULE B (FEC Form 3X)					INE NUMBER: PAGE 13 OF 320							
IT	EMIZED DISBURSEMENTS	Use separate s for each catego		(check onl	-								
		Detailed Summ		X 21b	22	23		24	25		26		
_				27	28a	28b		28c	29		30b		
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam												
\setminus	NAME OF COMMITTEE (In Full)												
	Women Speak Out PAC												
_	Full Name (Last, First, Middle Initial)												
Α.	Mary Katherine Collins			Date of Disbursement									
	Mailing Address 15 1/2 Magnoila Circle				11 17 2014								
	•		Code		Trans	saction ID	. 024	19746-	D6F0-/	IFF1.	.a		
	Searcy	AR 7214	43		- ITalis	action ib	. 024	13770	DOLU-		3		
	Purpose of Disbursement Mary Kate Collins Bonus for KS Work			001	Amoun	t of Each	Disbu	ırsemer	nt this I	Perio	b		
	Candidate Name Category/							,	427	'.59			
	Office Sought: House Disbursen	nent For:	<u> </u>										
		Primary	General										
	State: District:	Other (specify)	7										
_													
В.	Full Name (Last, First, Middle Initial)				Date o	f Disburse	ement						
٠.	Garland Honeycutt				M M		D /		Y	V			
	Mailing Address 1081 Fork Mountain					11 19 2014							
	•	State Zip (Code 05		Trans	saction ID) : 0EI	DCE7F1	-4CB6	-469E	 E-A		
	Purpose of Disbursement Travel Reimbursement			002	Amount of Each Disbursement this Pe						d		
	Candidate Name			Category/	-		-			-			
				Type				7	606	3.33	_		
	Office Sought: House Disbursen	nent For:	l										
		Primary	General										
	State: President State:	Other (specify)	7										
_	Full Name (Last, First, Middle Initial)												
C.	Dollar General				Date o	f Disburse	ement						
					M = M	/ D	_		YY	Υ			
	Mailing Address 395 Crimson Laurel Way				11		9	2	2014				
	,	State Zip (NC 2870	Code		Trans	saction ID	: DC	D6C17E	3-BE04	-4639	9-8		
	Purpose of Disbursement Supplies),j											
	Candidate Name			002	Amoun	t of Each	Disbu	ırsemer	nt this I	Perio	t		
	Candidate Name			Category/ Type					354	.65	П.		
	Office Sought: House Disbursen	nent For:		Туро	IMEMO	ITEMI		7					
		Primary	General) ITEM] tion Of Re	imbur	sement					
	President	Other (specify)	7		Romiza		bar	501110111					
_	State: District:												
s	SUBTOTAL of Disbursements This Page (optional)			·····		-,	_	1	1033	.92]		
1	OTAL This Period (last page this line number only)				L								

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PAGE 14 OF 32
23 24 25 26 28b 28c 29 30
ourpose of soliciting contributions
tributions from such committee.
Disbursement
21 2014
action ID : 166AF341-C731-4AE4-9
of Each Disbursement this Period
5. Laon Biobaroomont tino i onou
225.05
Disbursement
/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
19 2014
action ID : 17A19322-CB7B-422A-8
of Each Disbursement this Period
1067.31
Disbursement
/ D D / Y Y Y Y
19 2014
action ID : 0E966057-6EF3-4FF2-9
of Each Disbursement this Period
50.95
ITEM] on Of Reimbursement

S	CHEDULE B (FEC Form 3X)		- (-)	FOR LINE	NUMBER:		PAGE	. 15 (OF 320			
IT	EMIZED DISBURSEMENTS	Use separate schedule for each category of the		(check only		¬ aa	_ 	¬ ^-				
		Detailed Summary Pag		X 21b	22 28a	23 28b	24 28c	25 29	26 30b			
Δ,	ny information copied from such Reports and Stater	nents may not be sold or	r lised									
	for commercial purposes, other than using the name											
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	Women Speak Out PAC											
\angle	Full Name (Last, First, Middle Initial)											
A.	Office Depot				Date of I	Disburseme	ent					
					M M	/ D D		YY	Υ			
	Mailing Address 592 Hanes Mall Blvd				11	19	نصا ا	2014				
	City	State Zip Code			Transaction ID : AFDA3F5C-3162-49A							
	Winston-Salem	NC 27103			Transa	ction ID : A	AFDA3F50	J-3162·	-49A5-B			
	Purpose of Disbursement Supplies		П	002	Amount (sburseme	nt thic	Pariod				
	Candidate Name		۲ ا		/ iniodific (or Edon Di	Soursemen	10 0110	1 01100			
			L '	Category/ Type				104	4.95			
	Office Sought: House Disburser				[MEMO I	TEM]						
	Senate President	Primary General Gener	aı		Itemizatio	n Of Reimb	oursement					
	State: District:	Carlor (opeciny)										
	Full Name (Last, First, Middle Initial)											
В.	Walgreens				Date of I	Disburseme	∍nt					
	Mailing Address 3701 high Point Rd				м - м 11	19		2014	Y			
	Maining Address 3701 High Folia Rd				3.1	10		2014	_			
	,	State Zip Code			Transa	ction ID : 0	006D3F83	-3DC7-	-48A7-A			
	Greensboro Purpose of Disbursement	NC 27407										
	Supplies			002	Amount of	of Each Dis	sburseme	nt this	Period			
	Candidate Name			Category/				80	0.00			
	Office Sought: House Disburser	mont For:		Туре		7	-		0.00			
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٥.	WalMart				M M	/ D D		ΥΥΥ	Υ			
	Mailing Address 3605 High Point Rd				11	19		2014				
	City	State Zip Code										
		NC 27407			Transa	ction ID: 7	7889B9FC	-A290-	4A8E-A			
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	Office Sought: House Disburser	nent For:		· ·	[MEMO I	TEM]	,					
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Maili	ng Address	18 Fairhaven road							11			9		2014		
City	L			State NH	Zip Code				Trans	sact	ion ID	: 182	27813D	-7938-	4C5F	B
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City				State	Zip Code				Trans	sacti	ion ID	: 183	3F24F2	-CFFA	-423	3-B
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 17 OF 320
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlean orli)		
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30b
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or for commercial purposes, other than using the nar	ne and address of any polit	ical committee to	solicit contributions t	from such committee.
NAME OF COMMITTEE (In Full)				
│ Women Speak Out PAC				
Full Name (Last, First, Middle Initial)			Date of Disbursen	aont
A. Discount Bankcard			Date of Disburser	
Mailing Address 21215 Burbank Blvd			11 24	
Suite 300 City	State Zip Code			
Woodland Hills	CA 91367		Transaction ID :	20C6A12D-0482-4417-B
Purpose of Disbursement Credit Card Processing Fees		001	Amount of Each F	Disbursement this Period
Candidate Name			Amount of Each L	dispursement this Period
		Category/ Type	,	17.30
Office Sought: House Disburse Senate	ment For: Primary General			
President	Other (specify)			
State: District:	(1), v			
Full Name (Last, First, Middle Initial)				
B. Mr. Grayson Greco			Date of Disbursen	nent
Mailing Address 115 Wyndham Way			M = M / D = D	
Mailing Address 115 Wyndham Way			11 13	2014
,	State Zip Code		Transaction ID :	23545FF5-7AC6-43C5-A
Wilmington Purpose of Disbursement	NC 24811			
Travel Reimbursement		002	Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type		158.51
Office Sought: House Disburse	ment For:	71		
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Orleans Place, LLC			Date of Disbursen	nent
Mailing Address PO Box 52592			11 21	2014
City Lafayette	State Zip Code LA 70505		Transaction ID :	25A86309-E981-4C0F-8
Purpose of Disbursement	- 10303			
Rent		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/		900.00
Office Sought: House Disburse	ment For:	Type		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)				1075.81
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$ \setminus $	NAME OF COMMITTEE (In Full)													
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Λ.	Chain Bridge Bank													
	Mailing Address 1445-A Laughlin Avenue					\dashv	M M M	'	2	_		2014	Y	
	The first term of the first te					2017								ı
	City	State	Zip Code			Transaction ID : 26591F4F-D60B-							440	4.0
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C.	Cleco Power, LLC						Date of	f Dis	burse	men	t			
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	Mailing Address PO Box						11		2	_	Щ.	2014		
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	President	Other (spec	cify) 🔻											
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	Category/ Type	Amount of Each Dist	1425.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	LINE NUMBER: PAGE 20 OF 320						
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the) (check only	one)						
	Detailed Summary Page	X 21b	22	23 24 25 26					
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NAME OF COMMITTEE (In Full)									
Women Speak Out PAC									
Full Name (Last, First, Middle Initial)									
A. PayChex			Date of Dis	sbursement					
Mailing Address 911 Panorama Trail S			11	17 2014					
City	State Zip Code		Transacti	on ID : 6699BD7A-AB91-4943-A					
Rochester	NY 14625		ITalisacti	OII ID : 0039DD1A-AD31-4943-A					
Purpose of Disbursement Payroll Processing		001	Amount of	Each Disbursement this Period					
Candidate Name		Category/		125.28					
Office Sought: House Disburse	ement For:	Туре							
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)									
B. Taylor Wilson			Date of Dis						
Mailing Address 6300 terra verde dr			11	19 2014					
City	Chata Zin Conta								
City Raleigh	State Zip Code NC 27609		Transacti	on ID: 672D98DB-139F-437A-A					
Purpose of Disbursement									
Travel Reimbursement		002	Amount of	Each Disbursement this Period					
Candidate Name		Category/ Type		116.66					
Office Sought: House Disburse	ement For:								
Senate	Primary General								
President State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
C. Intuit			Date of Dis	sbursement					
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Mailing Address 2632 Marine Way			11	17 2014					
City	State Zip Code		Transacti	on ID : 6A8EB39B-7B23-485F-8					
Mountain View	CA 94042		ITAIISACII	UII ID . 0A0ED39D-7D23-403F-0					
Purpose of Disbursement Credit Card Processing Fees		001							
Candidate Name			Amount of	Each Disbursement this Period					
		Category/ Type		39.65					
Office Sought: House Disburse	ement For:	71		7					
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City	State Zip Code						
Mountain View Purpose of Disbursement	CA 94042	T	Transaction ID :	6AED2660-0050-4ACD-B			
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Candidate Name		Category/ Type		7.75			
Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼	1,750					
State: District:	(sp. 1-7), V						
Full Name (Last, First, Middle Initial)							
B. NC Unemployment			Date of Disbursem				
Mailing Address 1101 Mail Service Center			11 21	2014			
City Raleigh	State Zip Code NC 27699		Transaction ID :	6B79FE48-D75D-4685-A			
Purpose of Disbursement Taxes		001	Amount of Each D	isbursement this Period			
Candidate Name		Category/ Type		51.72			
Senate	sement For: Primary General						
State: President District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial) C. Laurie Lee			Date of Disbursem	nent			
			M M / D D				
Mailing Address 11104 Westpoint Court			11 19	2014			
City Little Rock	State Zip Code AR 72211		Transaction ID :	75B0CC1D-4636-47F4-8			
Purpose of Disbursement Travel Reimbursement		002	Amount of Each D	sisbursement this Period			
Candidate Name		Category/ Type	Amount of Each B	1130.43			
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)	71.					
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	City S Woodland Hills	State CA	Zip Code 91367			Trans	sacti	on ID	: 83F	E89090	-D48D	-4250	-B
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	Mailing Address 3 Putter Cove					11		19	3		2014		
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Α.	Discount Bankcard					Date o	t Dis	burse	men				
	Mailing Address 21215 Burbank Blvd					11	/	1			2014	Y	
	Suite 300												
	,	State	Zip Code			Transaction ID : 9EC6A76A-9B06-41AC							
	Woodland Hills	CA	91367			ITalis	sacti	טוו ווט	. JL	COATO	4-3D00)- 1,7-	10-0
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						M M	7	D	D	/ Y	Y Y	Y	
	Mailing Address 2632 Marine Way					11		2	4		2014		
	City	21-1-	7:- O-d-										
	City S Mountain View	State CA	Zip Code 94042			Trans	sacti	on ID	: A3	9A84F2	2-D7C7	7-46A	13-B
	Purpose of Disbursement			_	_								
	Credit Card Processing Fees			001		Amoun	t of	Each	Disb	urseme	nt this	Perio	od
	Candidate Name			Catego							3	30.17	
	Office Sought: House Disbursen	nent For		Туре	9			,	_	7			
	Senate	Primary	General										
	President	Other (spe	cify) 🔻										
	State: District:												
	Full Name (Last, First, Middle Initial)					_							
C.	Discount Bankcard					Date o	of Dis —	burse	men				
	Mailing Address 21215 Burbank Blvd					M = M	/	2	_		2014	Y	
	Suite 300												1
		State	Zip Code			Trans	sacti	on ID	: A6	1DEB2	4-2AE	B-4C	9A-8
	Woodland Hills Purpose of Disbursement	CA	91367										
	Credit Card Processing Fees			001	П	Amoun	t of	Each	Dich	urseme	nt thic	Dori	od
	Candidate Name			Catego	ory/	Amoun	11 01	Lacii	טוטט	urserrie	111 11113	I CIII	Ju
				Type				,			1	1.59	
	Office Sought: House Disburser												
	Senate President	Primary	General										
	State: District:	Other (spe	city) 🔻										
	2.55						_		_				_
s	SUBTOTAL of Disbursements This Page (optional)				▶						9	4.77	
\vdash						-			=	7			=
т	OTAL This Period (last page this line number only)				▶	Ι.							

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 25 OF 320
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	one)	
	Detailed Summary Page	X 21b	22	23 24 25 26
<u> </u>		27	28a	28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)				
│				
Full Name (Last, First, Middle Initial)				
A. Mr. Mick Bransfield			Date of Di	isbursement
Mailing Address 12720 Builders Rd			11	19 2014
City	State Zip Code		Transact	tion ID : A7740E11-9B33-47D4-9
Herndon	VA 20170		ITAIISACI	HOITID : A7740E11-9B33-47D4-9
Purpose of Disbursement Travel Reimbursement		002	Amount of	Each Disbursement this Period
Candidate Name		Category/ Type		2270.12
Office Sought: House Disburse	ment For:	, , , , , , , , , , , , , , , , , , ,		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Di	isbursement
B. Intuit				
Mailing Address 2632 Marine Way			11	24 2014
	State Zip Code CA 94042		Transact	tion ID : B23D0019-458F-4142-8
Mountain View Purpose of Disbursement	CA 94042			
Credit Card Processing Fees		001	Amount of	Each Disbursement this Period
Candidate Name		Category/		4.04
		Type		1.81
	ment For:			
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Intuit			Date of Di	isbursement
			M = M /	D D / Y Y Y Y
Mailing Address 2632 Marine Way			11	20 2014
City	State Zip Code		Transact	tion ID : B4BB5D13-2C16-4B49-9
Mountain View	CA 94042		Transact	1011 ID : B4BB3D13-2C16-4B49-9
Purpose of Disbursement Credit Card Processing Fees		004		
Candidate Name		001	Amount of	Each Disbursement this Period
Candidate Marile		Category/ Type		0.48
Office Sought: House Disburse	ment For:	Турс		<i>*</i>
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
CURTOTAL of Dishurance at This Board (1)				2272.41
SUBTOTAL of Disbursements This Page (optional)		······		
TOTAL This Period (last page this line number only				

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SCHEDULE B (FEC Form 3X)		FOR LINE	INE NUMBER: PAGE 26 OF 320							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Gricok Grily								
	Detailed Summary Page	X 21b	22	23 24	25	26				
Г		27	28a	28b 28c		30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
Women Speak Out PAC										
Full Name (Last, First, Middle Initial)										
A. Discount Bankcard			Date of D	Disbursement	Y Y Y Y	-				
Mailing Address 21215 Burbank Blvd Suite 300			11	20	2014	_				
City	State Zip Code		Transa	tion ID : BC446	EED D050 42	2C7_A				
Woodland Hills	CA 91367		Halisat		E3D-B636-43	CI-A				
Purpose of Disbursement Credit Card Processing Fees		001	Amount o	of Each Disburse	ement this Per	riod				
Candidate Name		Category/ Type			0.48	8				
Office Sought: House Disburse	ement For:									
Senate	Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)			Data of F	Disbursement						
B. Martha C Luke					Y . Y . Y . Y	_				
Mailing Address 345 S Club Ave			11	19	2014					
City St. Gabriel	State Zip Code LA 70776		Transa	ction ID : D4B04	1F8F-328C-44	01-9				
Purpose of Disbursement	21 10110									
Travel Reimbursement		002	Amount o	of Each Disburse	ement this Per	riod				
Candidate Name		Category/ Type		2 1	24.40	Ю				
Office Sought: House Disburse	ement For:	71								
Senate	Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial)C. DC Unemployment Services			Date of [Disbursement						
bo onemployment dervices			M M	/ D D /	Y	-				
Mailing Address 501 C St. NW #501			11	21	2014	_				
City Washington	State Zip Code DC 20001		Transac	ction ID : D9469	2A5-1D9F-47	44-B				
Purpose of Disbursement	20001									
Taxes		001	Amount o	of Each Disburse	ement this Per	riod				
Candidate Name		Category/ Type			1.60	0				
Office Sought: House Disburs	ement For:			, 1						
Senate	Primary General									
President	Other (specify) ▼									
State: District:										
SUBTOTAL of Disbursements This Page (optional)		·····•		7	26.48	В				
TOTAL This Period (last page this line number onl	y)	·····								

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 27		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b	22 23 24 25	
Γ		27	28a 28b 28c 29	
Any information copied from such Reports and Star or for commercial purposes, other than using the n				
NAME OF COMMITTEE (In Full)				
Women Speak Out PAC				
Full Name (Last, First, Middle Initial)				
A. IRS			Date of Disbursement	
Mailing Address IRS			11 18 2014	
City	State Zip Code			
Cincinnati	OH 45999		Transaction ID: E140281E-F89F-40E8-9	
Purpose of Disbursement Taxes		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	110.66	
	sement For:			
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. Beene Office Park, LLC			Date of Disbursement	
Mailing Address 2250 Hospital Drive Suite 220			11 21 2014	
City Bossier City	State Zip Code LA 71111		Transaction ID : E610576D-BA82-4560-	
Purpose of Disbursement Rent		001	Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	455.50	
Office Sought: House Disburs	sement For:			
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Andresen Blom			Date of Disbursement	
Mailing Address 101 Asbury Ct.			11 21 2014	
City	State Zip Code		Transaction ID - EA74000A D0P4 4DE	
Winchester	VA 22602		Transaction ID: EA74CC9A-D9B4-4D52	
Purpose of Disbursement Consulting		004		
Candidate Name		001 Category/	Amount of Each Disbursement this Period	
		Type	5000.00	
	sement For:			
Senate	Primary General			
State: President	Other (specify) ▼			
otate. District.				
SUBTOTAL of Disbursements This Page (optional)	······	5566.16	
TOTAL This Period (last page this line number on	ly)			

S	CHEDULE B (FEC Form 3X)			FOF	FOR LINE NUMBER:					PAGE 28 OF 32			320
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(che	ck only	y one)							
		Detailed Summary Page			21b 27	22 28a	22 23 28b 28b			24 25 29 29		26 30b	
_		<u> </u>											
	ny information copied from such Reports and Staten for commercial purposes, other than using the name												
Ţ.	NAME OF COMMITTEE (In Full)									-			
$ \rangle$	Women Speak Out PAC												
	Women Speak Out 1 AS												
_	Full Name (Last, First, Middle Initial)												
Α.	PayChex					Date of	of Disk	ourser	ment				
	Mailing Address 011 Panarama Trail S					11	/	18			y y 2014	Y	
	Mailing Address 911 Panorama Trail S					1,1		10)		2014		
	City	State	Zip Code			_						4440	_
	Rochester	NY	14625			Iran	sactio	on ID :	: EB/	′55035 _·	-857D-	41AC	-8
	Purpose of Disbursement Payroll Processing			-00] .			D: 1				
	Candidate Name			00		Amour	nt of E	ach I	Disbu	ırsemeı	nt this	Perio	đ
	Candidate Name			Categ Typ							4	8.80	
	Office Sought: House Disburser	nent For:		тур			,	,		7			
	Senate	Primary	General										
	President	Other (spe	ecify) 🔻										
_	State: District:												
D	Full Name (Last, First, Middle Initial)					Dete	4 D:-k						
О.	PayChex					Date of							
	Mailing Address 911 Panorama Trail S					11	1 /	21			2014	Y	
	g vii i angiama i ang												
		State	Zip Code			Tran	sactio	on ID	: ED2	24493F	-F231	4862-	.9
	Rochester Purpose of Disbursement	NY	14625										
	Payroll Processing			00	1	Amour	nt of E	Each [Disbu	ırsemei	nt this	Perio	d
	Candidate Name			Categ									
				Тур						7	17	3.73	
	Office Sought: House Disbursen	nent For:				1							
	Senate	Primary	General										
	State: District:	Other (spe	city) 🔻										
_	Full Name (Last, First, Middle Initial)												_
C.						Date of	of Disk	ourser	ment				
						M = N	1 /	D	D /	Υ	ΥΥΥ	Υ	
	Mailing Address 1445-A Laughlin Avenue					11		20)	2	2014		
	City		Zin Codo										
	City S McLean	State VA	Zip Code 22101			Tran	sactio	n ID	: F2D	FBF71	-8258	-4AC)-B
	Purpose of Disbursement			_	-	-							
	Wire Transfer Fee			00		Amour	nt of E	Each [Disbu	ırsemeı	nt this	Perio	d
	Candidate Name			Categ				_		-	1	5.00	П
	Office Sought: House Disburser	nont For		Тур	e					7		5.55	
		nent For: Primary	General										
	President	Other (spe											
	State: District:	(-1,-	<i>y</i> , ↓										
							-	-	=	-	_	-	一
s	SUBTOTAL of Disbursements This Page (optional)				▶			,		7	23	7.53	
												-	
Į T	OTAL This Period (last page this line number only)				▶					(II)			

SCHEDULE B (FEC Form 3X)	Hoo concrete estimate()	FOR LINE I	PAGE 29 OF 320	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b	one) 22 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and Stater		ed by any perso	on for the purpose of	f soliciting contributions
or for commercial purposes, other than using the name	ne and address of any politication	al committee to	solicit contributions	from such committee.
Women Speak Out PAC				
Full Name (Last, First, Middle Initial)			Data of Diahaman	
A. Trace Strategies, LLC			Date of Disbursen	
Mailing Address 11104 Westpoint Court			11 19	
	State Zip Code		Transaction ID :	F4850855-05A0-4E58-A
Little Rock Purpose of Disbursement	AR 72211		. ranoaonon ib .	1 1000000 00/10 1200 /1
Consulting		001	Amount of Each D	Disbursement this Period
Candidate Name		Category/		2442.74
		Type		3443.71
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) B. IRS			Date of Disbursen	nent
Mailing Address IRS			11 21	
Mailing Address 1K5			11 21	2014
	State Zip Code		Transaction ID :	: F549F0B3-86A4-4115-B
Cincinnati Purpose of Disbursement	OH 45999			
Taxes		001	Amount of Each [Disbursement this Period
Candidate Name		Category/ Type		1453.11
Office Sought: House Senate President State: Disburser Disburser	nent For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Activist Manager			Date of Disbursen	nent
Mailing Address PO Box 601			11 21	
City	State Zip Code			FA0A0444 F055 4555
Great Falls	VA 22066		ransaction ID :	FA6AC11A-E059-45E5-8
Purpose of Disbursement Consulting		001		
Candidate Name		Category/ Type	Amount of Each L	Disbursement this Period 3087.00
Office Sought: House Senate President State: Disburser	nent For: Primary General Other (specify)	,,		
SUBTOTAL of Disbursements This Page (optional)		·····		7983.82
TOTAL This Period (last page this line number only)				

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SCHEDULE B (FEC Form 3X)		FOR LINE	PAGE 30 OF 320				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	X 21b	22	23 24 25 26			
Г		27	28a	28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan							
NAME OF COMMITTEE (In Full)							
Women Speak Out PAC							
Full Name (Last, First, Middle Initial)							
A. Jay Canella			Date of Di	sbursement			
Mailing Address 3914 Lake Sherwood Ave			11	212014			
City	State Zip Code		Transport	ion ID : FC01D6F4-6074-478B-B			
East Batoun Rouge	LA 70816		Transact	1011 ID : FCU1D0F4-00/4-4/0B-B			
Purpose of Disbursement Rent		001	Amount of	Each Disbursement this Period			
Candidate Name		Category/ Type		1000.00			
Office Sought: House Disburser	nent For:	.,,,,		,			
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) B.			Data of Di	ahuraamant			
ь.			Date of Di	sbursement			
Mailing Address			M = M /	D D / Y Y Y Y Y			
City	State Zip Code						
Purpose of Disbursement							
Candidate Name			Amount of Each Disbursement this Period				
		Category/ Type					
Office Sought: House Disburser							
Senate	Primary General						
President State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C.			Date of Di	sbursement			
Mailing Address			M M /	D D / Y Y Y Y			
City	State Zip Code						
Purpose of Disbursement							
Candidate Name			Amount of	Each Disbursement this Period			
Candidate Name		Category/ Type					
Office Sought: House Disburser	nent For:			,			
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)		·····•		1000.00			
				25967.46			
TOTAL This Period (last page this line number only)				20907.40			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE FOR LI		OF 4 OF F	320 ORM 3X			
DENTIFICATION NUMBER ▼						

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	ort Amends report	filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Virginia T Grant		11 17 2014
Mailing Address 134 Shore Crest Circle		Amount
City State	Zip Code	20.00
Carrire MS	39426	Transaction ID : 9b14e229-e223-487a-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 17 / 2014
Name of Federal Candidate	Support C	Office Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		oisbursement For: ☐ Primary ☐ General O14
Full Name of Payee		
Virginia T Grant		Date of Public Distribution/Dissemination 11 17 2014
Mailing Address 134 Shore Crest Circle		Amount
City State	Zip Code	4.20
Carrire MS	39426	Transaction ID : 7ba5e56c-0b43-4033-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 17 2014
Name of Federal Candidate	Support (Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		24.20
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	1	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electroni	ically Filed]	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	05 18 2015

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	32	OF	320
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	ort Amends report file	d on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Amanda Boley Mailing Address Out Oct British		11 17 2014
Split Oak Drive		Amount
City State	Zip Code	80.00
charlotte NC	28227	Transaction ID : 2eef6dd0-3b87-4f6c-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 17 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District:00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disk 2014	oursement For: Primary General 4 Other (specify) ► Runoff
		Suiter (Speedily) P
Full Name of Payee Amanda Boley		Date of Public Distribution/Dissemination 11 17 2014
Mailing Address Split Oak Drive		Amount
City State	Zip Code	19.02
charlotte NC	28227	Transaction ID : 0ef58d5c-8dcc-429e-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 17 7 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dist 201	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	99.02
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
4		
(c) TOTAL Independent Expenditures	•	7
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electroni	ically Filed] Date	05 18 2015
Signature		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	33	OF	320
FOR L	NE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New re	eport Amends report fil	led on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Carla K Pilgreen Mailing Address 243 Standaliff Pr		11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
212 Stonecliff Dr		Amount
City State	Zip Code	30.00
West Monro LA	71291	Transaction ID: f139e70f-cda6-4f73-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 17 / 2014
Name of Federal Candidate	Support Of	ffice Sought: House District:00
Ms. Mary L Landrieu	Oppose [President State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 114
Full Name of Payee Carla K Pilgreen		Date of Public Distribution/Dissemination
Mailing Address 212 Stonecliff Dr		11 17 2014 Amount
City State	Zip Code	6.00
West Monro LA	71291	Transaction ID: 82f8d5c6-06c3-4c99-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 17 7 2014
Name of Federal Candidate	Support Of	ffice Sought: House District:00
Ms. Mary L Landrieu	Oppose [President State: LA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General O14 Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		36.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electro	onically Filed] Date	05 18 2015
Signature		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE		OF	320
FOR L	INE 24	OF F	ORM 3X

							FOR LINE 2	24 OF FORM 3X
NAME OF COMMITTEE (I						FEC	IDENTIFICATI	ON NUMBER ▼
Women Speak Ou	It PAC					С	C00530766	
Check if 24-hour repo	rt 48-hour report	New repo	ort Am	nends repo	ort filed on	М = М	/ D D /	Y = Y = Y
Full Name of Payee					Da	te of Pu	ublic Distribution	/Dissemination
Regina R Mouton Mailing Address						11 11	/ D D /	2014
5827	Brighton PI				An	nount		
City		State	Zip Code					21.50
New Orleans		LA	70131				n ID: 53bbdc13 sbursement or 0	
Purpose of Expenditure Salary	9		Category/ Type	001		11	17	2014
Name of Federal Cand	idate			Support	Office So	ught:	House	District: 00
Ms. Mary L Landrieu				Oppose		sident	X Senate	State: LA
Calendar Year-To- Per Election for C		7	554635.78	3	Disburser 2014	7	r: Primary (specify) ▶	General Runoff
Full Name of Payee Regina R Mouto	on				Da		ublic Distribution	/Dissemination
Mailing Address 5827	Brighton Pl				Ar	nount	الثا ا	2014
City		State	Zip Code					3.30
New Orleans		LA	70131				n ID : 2df3bec2- sbursement or (
Purpose of Expenditur Mileage	9		Category/ Type	002		M M M	17	2014
Name of Federal Cand	lidate			Support	Office So	ught:	House	District: 00
Ms. Mary L Landrieu			X	Oppose	Pre	sident	Senate	State:LA
Calendar Year-To- Per Election for C		, ,	554635.7	8	Disburser 2014	P)	r: Primary (specify) ▶	General Runoff
(a) SUBTOTAL of Itemi	zed Independent Expenditure	es					7 1 1 7	24.80
(b) SUBTOTAL of Unite	emized Independent Expendit	tures			· •		7 7	
(c) TOTAL Independent	Expenditures						7 1 7	
with, or at the request of	/ I certify that the independent suggestion of, any candidalitical party committee or its	ate or authorized						
Ms. Emily B	uchanan	[Electron	ically Filed]	Date	M M M	/ D 1		Y Y Y
Signature			_					

party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form	3X)						
ΓΙ	EMIZED INDEPENDENT EXPE	IDITURES				PAGE 35	OF 320 24 OF FORM 3X	
J.	AME OF COMMITTEE (In Full)							
	Vomen Speak Out PAC				FEC	IDENTIFICATI	ION NUMBER ▼	
					C	C00530766		
Cł	neck if 24-hour report 48-hou	ur report New repo	ort Amends rep	ort filed o	on M M M	/ D D /	Y = Y = Y = Y	
	Full Name of Payee				Date of Put	olic Distribution	n/Dissemination	
	Christopher Marquess				11	17	2014	
	Mailing Address 110 W Pecan St				Amount			
	City	State	Zip Code				55.00	
	Ville Platte	LA	70586				d9f61822-2a41-44c5-9 ement or Obligation	
	Purpose of Expenditure Salary		Category/ Type 001		11	17	2014	
	Name of Federal Candidate		Support	Office 5	Sought:	House	District:00	
	Ms. Mary L Landrieu		X Oppose		Ü	X Senate	State: LA	
	Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	sement For:		y General Runoff	
	Full Name of Payee Christopher Marquess				Date of Pub	olic Distribution	n/Dissemination 2014	
	Mailing Address 110 W Pecan St				Amount			
	City	State	Zip Code		· · ·		36.00	
	Ville Platte	LA	70586	I .		ID: f56fb2dc- bursement or		
	Purpose of Expenditure Mileage		Category/ Type 002		11	17	2014	
	Name of Federal Candidate		Support	Office	Sought:	House	District: 00	
	Ms. Mary L Landrieu		Oppose		President	X Senate	State: LA	
	Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	sement For:		y General Runoff	
	(a) SUBTOTAL of Itemized Independen	nt Expenditures		•			91.00	
	(b) SUBTOTAL of Unitemized Indepen	dent Expenditures		▶		-		
	(c) TOTAL Independent Expenditures			··· •		.	45	
	Under penalty of perjury I certify that twith, or at the request or suggestion of							

[Electronically Filed]

2015

18

05

Date

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ſ	PAGE FOR L	36 INE 24	OF FO	320 ORM 3X	-
					_
)	ENTIFI			BER ▼	

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼						
VV	omen Speak Out PAC		C C00530766			
Che	ck if 24-hour report 48-hour report New repor	rt Amends report	t filed on			
	Full Name of Payee		Date of Public Distribution/Dissemination			
	Gary W Fuhrmann		11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
ľ	Mailing Address 9425 Jessica Drive		Amount			
-	Dity State Z	Zip Code	52.50			
L		71106	Transaction ID: e2768e54-3d90-4507-b Date of Disbursement or Obligation			
	Purpose of Expenditure Salary	Category/ Type 001	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Ī	Name of Federal Candidate	Support	Office Sought: House District:00			
	Ms. Mary L Landrieu	X Oppose	President State: LA			
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Runoff Runoff			
┢	Full Name of Payee		Date of Public Distribution/Dissemination			
	Gary W Fuhrmann		11 17 2014			
	Mailing Address 9425 Jessica Drive		Amount			
Н	City State 2	Zip Code	7.50			
	•	71106	Transaction ID: c9f0c1c5-60b5-4122-8 Date of Disbursement or Obligation			
	Purpose of Expenditure Mileage	Category/ Type 002	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
┢	Name of Federal Candidate	Support	Office Sought: House District:00			
	Ms. Mary L Landrieu	Oppose	President Senate State: LA			
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014			
(8	SUBTOTAL of Itemized Independent Expenditures		60.00			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(0	r) TOTAL Independent Expenditures		•			
W	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Ms. Emily Buchanan [Electronic	eally Filed] Date	05 18 2015			
	Signature	Date				

PAGE	37	OF	320
FOR L	INE 24	OF FO	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on Man / Dan / Yaryary
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2565 Shire Circle	Amount
City State Zip C	Code 40.00
Harrisonburg VA 2280	Transaction ID : f3932ca4-0422-4be0-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cate	egory/ Type 001 11 17 / 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554	Disbursement For: Primary General 2014
Full Name of Payee	
Lesley Lennox	Date of Public Distribution/Dissemination 11 17 2014
Mailing Address 2305 Cleary Ave	Amount
City State Zip C	Code 12.50
Metairie LA 7000	O1 Transaction ID : 8192a80e-9fc8-42a1-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cate	egory/ Type 001 11 17 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554	Disbursement For: Primary General 2014 Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	52.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
	45 45
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures repor with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically I	Filed] Date 05 18 2015
Signature	

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 38 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
of Public Distribution/Dissemination
11 / 17 / 2014
ınt
1.50 action ID : 55c16141-f37c-424a-9 of Disbursement or Obligation
11 17 7 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
- "
Other (specify) Runoff
of Public Distribution/Dissemination
other (specify) F
of Public Distribution/Dissemination 11 17 2014
of Public Distribution/Dissemination 11 17 2014 unt 60.00
of Public Distribution/Dissemination 11 17 2014
of Public Distribution/Dissemination 11 17 2014 unt 60.00 action ID: 6702fcd5-7e86-47d6-b
of Public Distribution/Dissemination 11 17 2014 11 60.00 action ID: 6702fcd5-7e86-47d6-b of Disbursement or Obligation
of Public Distribution/Dissemination 11 17 2014 unt 60.00 action ID: 6702fcd5-7e86-47d6-b of Disbursement or Obligation
of Public Distribution/Dissemination 11

Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Lesley Lennox Mailing Address 2305 Cleary Ave Amou City State Zip Code LA Metairie 70001 Transa Date Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Tammay Williams Mailing Address 924 N. Prieur St Amou City State Zip Code New Orleans LA 70116 Transa Date Purpose of Expenditure Category/ 001 Salary Type Name of Federal Candidate Support Office Soug Ms. Mary L Landrieu Oppose Presid Disburseme Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

Check if

City

NAME OF COMMITTEE (In Full) Women Speak Out PAC

> Full Name of Payee **Tammay Williams**

Mailing Address

New Orleans

Purpose of Expenditure

24-hour report

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

924 N. Prieur St

48-hour report

New report

Zip Code

70116

State

LA

		PAGE 39 OF 320 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
		C C00530766
Amends repo	rt filed	on Mam / Dad / Yayayay
		Date of Public Distribution/Dissemination
		11 17 / 2014
		Amount
е		15.00 Transaction ID : 9d99c983-5fcf-4020-8
ory/ vpe 002		Date of Disbursement or Obligation 11 17 2014
Support	Office	e Sought: House District: 00
Oppose		President X Senate State: LA
5.78	Disbi 2014	ursement For: Primary General Nother (specify) ► Runoff
		Date of Public Distribution/Dissemination
		11 17 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Amount
e		30.00 Transaction ID : 73281243-1c5d-407a-a Date of Disbursement or Obligation
ory/ vpe 001		11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Support	Offic	e Sought: House District: 00
Oppose		President State: LA
5.78	Disb 2014	ursement For: Primary General Nother (specify) ► Runoff
		Stron (opcony) - 100000
	•	45.00
		7 7 7
	•	
		7 7 7

Category/ Mileage 002 Type Name of Federal Candidate Support Ms. Mary L Landrieu Oppose Calendar Year-To-Date 554635.78 Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City State Zip Code **New Orleans** LA 70188 Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Ms. Mary L Landrieu Oppose Calendar Year-To-Date 554635.78 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature FEC Schedule E (Form 3X) Rev. 09/2013

SCHEDULE E (FEC Form 3X)	to
TEMIZED INDEPENDENT EXPENDITURES	PAGE 40 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Ame	ends report filed on M M / D D / Y Y Y Y Y
Full Name of Payee Antoinette Franklin	Date of Public Distribution/Dissemination
Mailing Address 8822 Apple St	11 17 2014 Amount
City State Zip Code New Orleans LA 70188	9.00 Transaction ID : 673/d3ad-b81f-//453-8
	Transaction ID : 6734d3ad-b81f-4453-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	002
Name of Federal Candidate	upport Office Sought: House District: 00
Ma Marriel Landrice	ppose President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014
Full Name of Payee Francis Richardson	Date of Public Distribution/Dissemination
Mailing Address 220 Doucet Rd	11 17 2014 Amount
City State Zip Code	30.00
Lafayette LA 70503	Transaction ID : 4a105b39-09a2-4f62-8
Purpose of Expenditure Salary Category/ Type	Date of Disbursement or Obligation 001 11 17 2014
Name of Federal Candidate	upport Office Sought: House District: 00
Ma Marad Landrian	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	39.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported here with, or at the request or suggestion of, any candidate or authorized committee or party committee) any political party committee or its agent.	
Ms Emily Ruchanan	

[Electronically Filed]

05

Date

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ΤEI	MIZED INDEPENDENT EXPEND	ITURES			PAGE 41 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) /omen Speak Out PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766
Che	eck if 24-hour report 48-hour	report New repo	ort Amends repo		M M / D D / Y Y Y Y Y
Т	Full Name of Payee Francis Richardson				of Public Distribution/Dissemination
-	Mailing Address 220 Doucet Rd			L'	11 17 2014
	220 Doucet No			Amou	unt
- 1	City Lafayette	State LA	Zip Code 70503		0.63 action ID : 0ecf2723-35dd-4476-b of Disbursement or Obligation
Ì	Purpose of Expenditure Mileage		Category/ Type 002		11 17 2014
ŀ	Name of Federal Candidate		Support	Office Sough	ht: House District: 00
Ì	Ms. Mary L Landrieu		Oppose	Presid	
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For:
ľ	Full Name of Payee Sheri J Peace			Date	of Public Distribution/Dissemination
-	Mailing Address 9685 Paula St			Amou	
-	City	State	Zip Code	$\dashv \sqcap$	75.00
	Keithville	LA	71047		action ID : 6cd9fa6a-2660-4f26-a of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	$\exists \mid [$	11 / 17 / 2014
ľ	Name of Federal Candidate		Support	Office Sough	ht: House District: 00
L	Ms. Mary L Landrieu		X Oppose	Presid	dent Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014	ent For:
((a) SUBTOTAL of Itemized Independent	Expenditures			75.63
((b) SUBTOTAL of Unitemized Independent	nt Expenditures			
((c) TOTAL Independent Expenditures			· · ·	7 7 7
W	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed]	o 05 /	18 2015
	Signature		Date	, 00	10 2010

	EMIZED INDEPENDENT EXPENI	DITURES			PAGE 42 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			F	FEC IDENTIFICATION NUMBER ▼
۷	Women Speak Out PAC			[C C00530766
Cł	heck if 24-hour report 48-hour	r report New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
	Full Name of Payee			Date of	Public Distribution/Dissemination
	Sheri J Peace			1	1 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 9685 Paula St			Amount	:
	City	State	Zip Code		14.40
	Keithville	LA	71047		tion ID: 852c2294-11ba-4003-8 Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	M 1	1 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		Oppose	Presiden	
	Calendar Year-To-Date Per Election for Office Sought	7 7	554635.78	Disbursement 2014	For:
	Full Name of Payee Felicia A Jones			М	f Public Distribution/Dissemination
	Mailing Address 4106 Martha St			Amount	t
	City	State	Zip Code		80.00
	Shreveport	LA	71109		tion ID : f68dd5de-4df1-4b61-a f Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	М	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		X Oppose	Presiden	nt Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014 Oth	For: Primary General ner (specify) ► Runoff
-	(a) SUBTOTAL of Itemized Independent	Expenditures		· []	94.40
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		· •	7 7 7
	(c) TOTAL Independent Expenditures			· .	7 7 7
_	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party committee	any candidate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed] Date	M M / O5	18 2015
	Signature		_ Date	' L L	'

TE	EMIZED INDEPENDENT EXPEND	ITURES			PAGE 43 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
٧	Nomen Speak Out PAC				C C00530766
Ch	heck if 24-hour report 48-hour	report New repo	ort Amends repo		* M / D = D / Y = Y = Y
_	Full Name of Payee Felicia A Jones				of Public Distribution/Dissemination
	Mailing Address			M	11 17 2014
	4106 Martha St			Amour	nt
	City	State	Zip Code		10.50
	Shreveport	LA	71109		ction ID: ab5dd95f-39da-4a64-9 of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	М	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sough	t: House District:00
	Ms. Mary L Landrieu		X Oppose	Preside	ent X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014 X Of	t For:
	Full Name of Payee				of Public Distribution/Dissemination
	Cynthia J Christmas			М	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1731 Frenchmen St			Amou	nt
	City	State	Zip Code	-	80.00
	New Orleans	LA	70116	I	ction ID: 45665842-ffc0-4ede-b of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sough	it: House District: 00
	Ms. Mary L Landrieu		X Oppose	Preside	ent Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemen 2014	_ , _
_	1 61 Liection for Office Sough			X o	ther (specify) Runoff
	(a) SUBTOTAL of Itemized Independent	Expenditures			90.50
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		-	
	(c) TOTAL Independent Expenditures			· ·	7 1 7 1 7
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed]	M M /	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		Date	, 03	2013

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36	CHEDULE E (FEC Form 3X)		
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 44 OF 320 FOR LINE 24 OF FORM 3X
\ I /	ME OF COMMITTEE (In Full)		
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
_			C C00530766
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Cynthia J Christmas		Date of Public Distribution/Dissemination
	Mailing Address		11 / 17 / 2014
	1731 Frenchmen St		Amount
	City State	Zip Code	10.50
	New Orleans LA	70116	Transaction ID : 2bda7e4a-b4e7-4edf-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 17 2014
		Туре	
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	Full Name of Payee Christopher L Gilbert		Date of Public Distribution/Dissemination
	Mailing Address		11 17 2014
	55 Lovell Johnson Rd		Amount
	City State	Zip Code	80.00
	Picayune MS	39466	Transaction ID: 7db6f2fb-1f56-40de-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ 001	11 17 17 2014
	,	Type 001	
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
	(a) SUBTOTAL of Itemized Independent Expenditures		90.50
	(b) SUBTOTAL of Unitemized Independent Expenditures		
			7 7
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized		
	with, or at the request or suggestion of, any candidate of authorized	a commutee or agent t	in charles, or the treporting entity is not a political

party committee) any political party committee or its agent. Ms. Emily Buchanan

[Electronically Filed] 05 18 2015 Date Signature

	PAGE FOR LI	45 INE 24	OF OF F	320 ORM 3X	1
					_
С	ENTIFI	CATIO	N NUM	BER ▼	1

						FOR LINE 2	4 OF FORM 3X
NAME OF COMMITTEE (In Full)					FEC II	DENTIFICATION	ON NUMBER ▼
Women Speak Out PAC					С	C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amer	nds repo	rt filed on	- M		Y Y Y Y
Full Name of Payee				Date	of Publi	c Distribution/	Dissemination
Christopher L Gilbert Mailing Address					11 ^M	17	2014
55 Lovell Johnson Rd				Amou	nt		
City	State	Zip Code					46.20
Picayune	MS	39466				D: e5c8edac- ursement or C	
Purpose of Expenditure Mileage		Category/ Type	002		11 M	17	2014
Name of Federal Candidate		Su	pport	Office Sough	t:	House	District:00
Ms. Mary L Landrieu		X Op	pose	Preside	ent 2	Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	7	Disbursemen 2014		Primary	General Runoff
						pecify) ►	
Full Name of Payee Lilly Green					of Publi	c Distribution/	/Dissemination 2014
Mailing Address 205 Medallion Circle				Amou			2014
City	State	Zip Code					80.00
Shreveport	LA	71119		I		D: c03f8e6d-9 ursement or C	
Purpose of Expenditure Salary		Category/ Type	001		11	17	2014
Name of Federal Candidate		Su	ıpport	Office Sough	nt:	House	District:00
Ms. Mary L Landrieu		X Or	opose	Preside	ent]	X Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	554635.78		Disbursemer 2014		Primary	General Runoff
(a) SUBTOTAL of Itemized Independent Expenditure	s			· [126.20
(b) SUBTOTAL of Unitemized Independent Expenditu	ures			· .			
(c) TOTAL Independent Expenditures				· [1 7	1 1 4	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized						
Ms. Emily Buchanan	[Electroni	ically Filed]	Date	05 /	18	/ Y Y 201	
Signature		_					

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 46 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
filed on Man / Dad / Yayayay
Date of Public Distribution/Dissemination
11 / 17 / Y Y Y Y Y Y Y
Amount
50.40
Transaction ID : 8a9b63d1-b5e7-4ac2-a
Date of Disbursement or Obligation
11 17 2014
Office Sought: House District: 00
President Senate State: LA
Disbursement For: Primary General
Other (specify) ► Runoff
Date of Public Distribution/Dissemination
11 17 2014
Amount
80.00
Transaction ID : c2319680-67c6-4383-8
Date of Disbursement or Obligation
11 17 2014
Office Sought: House District: 00
President Senate State: LA
Disbursement For: Primary General
Other (specify) Runoff
130.40
7 7
·

Check if 24-hour report 48-hour report New report Amends report Full Name of Payee Lilly Green Mailing Address 205 Medallion Circle City State Zip Code LA Shreveport 71119 Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support С Ms. Mary L Landrieu Oppose Calendar Year-To-Date 2 554635.78 Per Election for Office Sought Full Name of Payee Gregory Green Mailing Address 2506 Bolch Street City State Zip Code Shreveport LA 71104 Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Ms. Mary L Landrieu Oppose Calendar Year-To-Date 554635.78 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature FEC Schedule E (Form 3X) Rev. 09/2013

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)				
EMIZED INDEPENDENT EXPENDITURES	S			PAGE 47 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				
				C C00530766
heck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y B Y B Y
Full Name of Payee Gregory Green				f Public Distribution/Dissemination
				11 17 2014
Mailing Address 2506 Bolch Street			Amour	ıt
City	State	Zip Code		64.50
Shreveport	LA	71104		ction ID: e252f1a2-a5c0-4af0-b of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M	11 17 / 2014
Name of Federal Candidate		Support	Office Sought	: House District:00
Ms. Mary L Landrieu		X Oppose	Preside	
Calendar Year-To-Date		55 1005 70	Disbursement	For: Primary General
Per Election for Office Sought		554635.78	2014 X Ot	her (specify) ▶Runoff
Full Name of Payee			Date o	of Public Distribution/Dissemination
Zachary Vidrine			M	11 17 2014
Mailing Address 202 Rue Des Cajun			Amour	nt
City	State	Zip Code		65.00
Ville Platte	LA	70586		ction ID : 7a6998f9-fab2-49bf-8 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ 001		11 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Galary		Type 001	_	2014
Name of Federal Candidate		Support	Office Sought	t: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	ent Senate State: LA
Calendar Year-To-Date		EE 462E 79	Disbursement	t For: Primary General
Per Election for Office Sought	7	554635.78	2014 X Ot	ther (specify) ▶Runoff
(a) SUBTOTAL of Itemized Independent Expenditu	ires		· •	129.50
(b) SUBTOTAL of Unitemized Independent Expend	ditures		· •	4 1 4 1 4
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			<u> </u>	7 7 7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized			

[Electronically Filed]

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Date

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	age# 1995139315/			
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES			PAGE 48 OF 320
				FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC			C C00530766
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	ort filed or	M = M / D = D / Y = Y = Y
	Full Name of Payee Zachary Vidrine		С	Date of Public Distribution/Dissemination
	Mailing Address 202 Rue Des Cajun		Δ	mount
	City	Zin Cada	r	17.10
	City State Ville Platte LA	Zip Code 70586		ansaction ID: 42b05423-f148-4d99-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002		11 / 17 / 2014
	Name of Federal Candidate	Support	Office S	ought: House District:00
	Ms. Mary L Landrieu	X Oppose	Pi	resident Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014 _	oment For: Primary General Other (specify) ► Runoff
	Full Name of Payee Joshua J Huffman			Date of Public Distribution/Dissemination
	Mailing Address 211 Dixie Ave		A	Amount
	City State	Zip Code		70.00
	Harrisonburg VA	22801		ansaction ID : 7c4ea002-263b-4b70-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 17 / 2014
	Name of Federal Candidate	Support	Office S	ought: House District: 00
	Ms. Mary L Landrieu	Oppose		resident Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014 _	ement For: Primary General ✓ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures			87.10
	(b) SUBTOTAL of Unitemized Independent Expenditures		· •	1171171171
	(c) TOTAL Independent Expenditures			
_				

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						

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	URES		PAGE 49 OF 320 FOR LINE 24 OF FORM 3>
ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC			C C00530766
eck if 24-hour report 48-hour report	ort New	report Amends repo	ort filed on
Full Name of Payee Evelyn Lesaicherre			Date of Public Distribution/Dissemination
Mailing Address 629 Radiance Ave			Amount
City Metairie	State LA	Zip Code 70001	80.00 Transaction ID: a7ef21b0-91ea-4b23-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / 17 / 2014
Name of Federal Candidate Ms. Mary L Landrieu		Support Oppose	Office Sought: House District: 00 President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
Full Name of Payee Evelyn Lesaicherre Mailing Address 629 Radiance Ave			Date of Public Distribution/Dissemination M
City	State	Zip Code	4.50
Metairie	LA	70001	Transaction ID : 581078ae-36f3-4d92-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 17 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	1 1 7 1 1	554635.78	Disbursement For: Primary General 2014
a) SUBTOTAL of Itemized Independent Exp	enditures		▶ 84.50
b) SUBTOTAL of Unitemized Independent E	Expenditures		
c) TOTAL Independent Expenditures			

party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	18	2015
Signature					

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
Π	EMIZED INDEPENDENT EXPENDITURES		PAGE 50 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New re	report Amends repo	ort filed on
	Full Name of Payee Jenny N Brown		Date of Public Distribution/Dissemination
	·		11 / 17 / 2014
	Mailing Address 1270 Lovelady Rd		Amount
	City State	Zip Code	40.00
	West Monroe LA	71292	Transaction ID: 46785a8b-7611-4bce-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 17 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	Full Name of Payee Jenny N Brown Mailing Address 1270 Lovelady Rd		Date of Public Distribution/Dissemination 11
	· ·		Amount
	City State	Zip Code	7.50
	West Monroe LA	71292	Transaction ID: 989dbd45-a2c7-4840-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		
	(a) SOBTOTAL OF REFINZED INDEPENDENT EXPENDITURES		• 47.50
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •
	(c) TOTAL Independent Expenditures		
			7 7
	Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		

[Electronically Filed]

05

Date

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TEMIZED INDEPENDENT EXPENDITURES		PAGE 51 OF 320
		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends repor	t filed on WWW / DWD / YWYWY
Full Name of Payee Cynthia N Schmit		Date of Public Distribution/Dissemination
Mailing Address 2226 Taft Circle Apt 1		11
City State	Zip Code	22.50
Winchester VA	22601	Transaction ID : cc80eb82-a69b-434d-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 17 / Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Full Name of Payee Virginia T Grant		Date of Public Distribution/Dissemination
Mailing Address 134 Shore Crest Circle		Amount
City State	Zip Code	40.00
Carrire MS	39426	Transaction ID : 519f3da5-4c49-4fb1-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		62.50
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURI	S			PAGE 52 OF 320
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New r	report Amends repo		M / D = D / Y = Y = Y
Full Name of Payee Virginia T Grant			M	f Public Distribution/Dissemination
Mailing Address 134 Shore Crest Circle			Amoun	11 17 2014 t
	01-4-	Zin Ondo		0.70
City Carrire	State MS	Zip Code 39426		8.70 tion ID : 50e95738-9f33-414f-b f Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M	11 17 2014
Name of Federal Candidate		Support	Office Sought	: House District:00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014 Ott	For: Primary General her (specify) ▶ Runoff
Full Name of Payee				f Public Distribution/Dissemination
ERIC TABARY				11 17 2014
Mailing Address 6101 NORA ST			Amour	nt .
City	State	Zip Code		60.00
METAIRIE	LA	70003		ction ID: 50a525d2-2e32-4012-8 f Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 17 2014
Name of Federal Candidate		Support	Office Sought	: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	nt Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014 X Ot	For: Primary General her (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expendi	tures		· .	68.70
(b) SUBTOTAL of Unitemized Independent Expe	nditures			
				7 7 7
(c) TOTAL Independent Expenditures			· ·	7 7 7
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any cand party committee) any political party committee or	didate or authoriz			
Ms. Emily Buchanan	[Electr	ronically Filed] Date	M M / 05	18 2015

Date

SCHEDULE E (FEC ITEMIZED INDEPENDEN

	age# 15951393162				
	CHEDULE E (FEC Form 3) EMIZED INDEPENDENT EXPEND				PAGE 53 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC				C C00530766
Ch	eck if 24-hour report 48-hour r	eport New rep	port Amends repor	t filed or	M = M / D = D / Y = Y = Y
	Full Name of Payee				Date of Public Distribution/Dissemination
	ERIC TABARY				11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6101 NORA ST			Δ	Amount
	City	State	Zip Code		1.50
	METAIRIE	LA	70003		ansaction ID: ed33df19-b9d1-487d-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002		11 17 / 2014
	Name of Federal Candidate		Support	Office S	ought: House District: 00
	Ms. Mary L Landrieu		X Oppose	Pi	resident X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	2014 _	ement For: Primary General Other (specify) ▶ Runoff
	Full Name of Payee				Date of Public Distribution/Dissemination
	Francesca Blom				11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 101 Asbury Ct			A	Amount
	City	State	Zip Code		90.00
	Winchester	VA	22602	I .	ransaction ID : 4e2acc58-e79c-4302-a
	Purpose of Expenditure Salary		Category/ Type 001		Date of Disbursement or Obligation 11 17 2014
	Name of Federal Candidate		Support	Office S	Sought: House District: 00
	Ms. Mary L Landrieu		Oppose		resident X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburse 2014	ement For: Primary General
_	() OUDTOTAL ()				
	(a) SUBTOTAL of Itemized Independent E	expenditures		•	91.50
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		•	7 7 7
	(c) TOTAL Independent Expenditures			•	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 N	18	2015
Signature					
Oignature .					

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES	PAGE 54 OF 320
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee Theresa a Youngblood	Date of Public Distribution/Dissemination
Mailing Address 102 S Main Street Apt A2	11 17 2014 Amount
City State Zip Code	80.00
Berryville VA 22611	Transaction ID : 99def949-713e-4f4e-b
Purpose of Expenditure Salary Category/ Type 001	Date of Disbursement or Obligation 11 17 2014
Name of Federal Candidate Support Offic	te Sought: House District: 00
Ms. Mary L Landrieu Support Onic	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For:
Full Name of Payee Julia Perry	Date of Public Distribution/Dissemination 11 17 2014
Mailing Address 2046 Perrin St Apt C	Amount
City State Zip Code	100.00
Shreveport LA 71101	Transaction ID : 2855c73a-e632-4d95-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	180.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan	M / D D / Y Y Y

[Electronically Filed]

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Date

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TEMIZED INDEPENDENT EXPEND	-			PAGE 55 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour r	eport New rep	ort Amends rep	oort filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee Julia Perry				Date of Public Distribution/Dissemination
Mailing Address 2046 Perrin St Apt C				Amount
City	State	Zip Code		12.90
Shreveport	LA	71101		Transaction ID : 4cb17c15-9e4b-4a9a-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	2	11 17 / 2014
Name of Federal Candidate		Cupport	Offic	e Sought: House District: 00
Ms. Mary L Landrieu		Support Oppose		President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	ursement For:
Full Name of Payee Carl Brent				Date of Public Distribution/Dissemination
Mailing Address 6718 Lake Willow Dr				Amount
City	State	Zip Code		80.00
New Orleans	LA	70126		Transaction ID : a4611787-2221-4e58-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 17 2014
Name of Federal Candidate		Support	Offic	ee Sought: House District:00
Ms. Mary L Landrieu		X Oppose		President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent E	Expenditures		···· ▶	92.90
(b) SUBTOTAL of Unitemized Independen	t Expenditures		···· >	
(c) TOTAL Independent Expenditures			▶	
	ny candidate or authorized			nade in cooperation, consultation, or concert er, or (if the reporting entity is not a political
Ms. Emily Buchanan	[Electron	nically Filed]	te (05 18 2015

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 56 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M
of Public Distribution/Dissemination
11 / 17 / 2014
nt
12.00
ction ID : 869fc139-b0de-4735-9 of Disbursement or Obligation
11 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: House District: 00
ent Senate State: LA
nt For: Primary General
other (specify) ▶Runoff
of Public Distribution/Dissemination
of Public Distribution/Dissemination
W = M / D = D / Y = Y = Y
11 / 17 / 2014 unt 80.00
11 / 17 / 2014 unt
11 17 2014 ant 80.00 action ID : deb2cca3-8ff7-4fde-8
11 17 2014 Int 80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation
11 17 2014 11 80.00 11 80.00 12 10 10 10 10 10 10 10 10 10 10 10 10 10
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11 17 17 2014 11 17 2014
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11
80.00 action ID: deb2cca3-8ff7-4fde-8 of Disbursement or Obligation 11

Women Speak Out PAC Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Carl Brent Mailing Address 6718 Lake Willow Dr Amou City State Zip Code LA **New Orleans** 70126 Transa Date Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Preside Disbursemen Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Michael Vidrine Mailing Address 1103 West Wilson Street Amou City State Zip Code Ville Platte LA 70586 Transa Date Purpose of Expenditure Category/ 001 Salary Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

	PAGE FOR LI		OF OF FO	320 ORM 3X	-
D	ENTIFI	CATIO	N NUM	BER ▼	1

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Michael Vidrine	11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1103 West Wilson Street	Amount
City State Zip Code	30.90
Ville Platte LA 70586	Transaction ID: 8c52a14c-a217-488c-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 17 2014
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary General Nother (specify) ► Runoff
Full Name of Davis	Curier (Speerly)
Full Name of Payee Jeanne Tribou	Date of Public Distribution/Dissemination 11 17 2014
Mailing Address 22369 Ponderosa Dr.	Amount
City State Zip Code	40.00
Mandeville LA 70471	Transaction ID : ed870f42-6e8a-4361-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 17 / 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General ✓ Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	70.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
r	7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES		PAGE 58 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report Ar	mends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee	Date	of Public Distribution/Dissemination
Jeanne Tribou	Г	11 17 2014
Mailing Address 22369 Ponderosa Dr.	Amor	
City State Zip Code		6.90
Mandeville LA 70471		action ID : 9d64e171-f66c-445e-b of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	/ 002	11 17 2014
Name of Federal Candidate	Support Office Soug	ht: House District:00
Ma Marcel Landrice	Oppose Presid	
Calendar Year-To-Date	Disburseme	
Per Election for Office Sought 554635.7	2014	Other (specify) Runoff
Full Name of Payee Colton R Overcash	Date	of Public Distribution/Dissemination
Mailing Address 121 Ohara Dr	Amo	
City State Zip Code		95.00
Salisbury NC 28147		action ID : 5d686bd9-6553-475d-a of Disbursement or Obligation
Purpose of Expenditure Salary Category, Type	/ 001	11 17 2014
Name of Federal Candidate	Support Office Soug	ht: House District: 00
Ms. Mary L Landrieu	Oppose Presid	dent Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.	Disburseme 2014	ont For: ☐ Primary ☐ General Other (specify) ► Runoff
	<u> </u>	Other (openity)
(a) SUBTOTAL of Itemized Independent Expenditures	······································	101.90
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 4
(c) TOTAL Independent Expenditures	······· <u> </u>	
Under penalty of perjury I certify that the independent expenditures reported he with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically Filed]	/ /	18 / Y Y Y Y Y Y Y Y Y Y
Signature	Date 05	18 2015

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	CHEDULE E (FEC Form 3X)		
Ti	EMIZED INDEPENDENT EXPENDITURES		PAGE 59 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Nomen Speak Out PAC		C C00530766
_ Cł	heck if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
_	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination
	Mailing Address 121 Ohara Dr		Amount 17 2014
	City State Salisbury NC	Zip Code 28147	72.90 Transaction ID : 6768bb8a-c18d-4dee-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	Full Name of Payee Christine Stevens		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		11 17 2014 Amount
	City State	Zip Code	70.00
	Winchester VA	22602	Transaction ID : 10493cd5-82b6-4d62-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 17 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
,	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 142.90
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
_	(c) TOTAL Independent Expenditures		· • · · · · · · · · · · · · · · · · · ·
-	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

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TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 60 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Ch	neck if 24-hour report 48-hour report New rep	oort Amends repo	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Jazmine d Conner Mailing Address 400 ASPURY CT		11 17 / 2014
	100 ASBURY CT		Amount
	City State	Zip Code	60.00
	WINCHESTER VA	22602	Transaction ID : 67311cc0-15b0-4dfd-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 17 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Jon E Conner		11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 100 Asbury Ct		Amount
	City State	Zip Code	60.00
	Winchester VA	22602	Transaction ID : 5f5dd19e-780e-4f88-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		120.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan [Electron	nically Filed]	05 18 2015
	Signature	Date	2010

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
Women Speak Out PAC				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on Mam / Dad / Yayayay	
Full Name of Payee Rodney O Culbreath				Date of Public Distribution/Dissemination	
				11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 100 Asbury Ct				Amount	
City State	e	Zip Code		70.00	
Winchester VA		22602		ransaction ID: 7879ef91-c001-4e55-9 Date of Disbursement or Obligation	
Purpose of Expenditure Salary		Category/ Type 001		11 17 2014	
Name of Federal Candidate		Support	Office	Sought: House District: 00	
Ms. Mary L Landrieu		X Oppose		President Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	sement For: Primary General	
				X Other (specify) ►Runoff	
Full Name of Payee Rodney D Culbreth				Date of Public Distribution/Dissemination	
Mailing Address				11 17 2014	
100 Asbury C1		Amount			
3200 Dam Neck Rd City State	te	Zip Code		70.00	
Winchester VA		22602	1	Transaction ID: e123f00e-9d25-4186-8 Date of Disbursement or Obligation	
Purpose of Expenditure Salary		Category/ Type 001		11 17 2014	
Name of Federal Candidate		Support	Office	Sought: House District: 00	
Ms. Mary L Landrieu		Oppose		President State: LA State:	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbur 2014	sement For: Primary General Other (specify) ► Runoff	
•					
(a) SUBTOTAL of Itemized Independent Expenditures			▶	140.00	
(b) SUBTOTAL of Unitemized Independent Expenditures					
.,				7 7 7	
(c) TOTAL Independent Expenditures			·· •		
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.	authorized	•		•	
Ms. Emily Buchanan	[Electroni	cally Filed]	M	M / D D / Y Y Y Y Y	
Signature		Date	9 05	18 2015	

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)								
ΓΙ	EMIZED INDEPENDENT EXPENDITURES						PAGE 62	OF 320 24 OF FORM	
V/	AME OF COMMITTEE (In Full)					FEC	IDENTIFICATION		
۷	Vomen Speak Out PAC					C	C00530766	JA NOMBEL	
Cł	neck if 24-hour report 48-hour report	New repo	ort Ame	ends repo	rt filed	on M M	/ D D /	Y Y Y	Y
	Full Name of Payee Rze Culbreath Mailing Address 100 Asbury Ct					Date of Pub	lic Distribution/	Disseminatio	
	100 Asbury Ct					Amount			
	City Winchester	State VA	Zip Code 22602				ID: c1aa9ba3- oursement or (
	Purpose of Expenditure Salary		Category/ Type	001		11 11	17	2014	Y
	Name of Federal Candidate		S	upport	Office	e Sought:	House	District: 00	0
	Ms. Mary L Landrieu		Xo	ppose		President	X Senate	State: LA	4
	Calendar Year-To-Date Per Election for Office Sought	, , ,	554635.78		Disbu 2014	ursement For:	Primary	Gene Runoff	eral
	Full Name of Payee Michael B Fuhrmann Mailing Address 329 Columbia St					Date of Pub	lic Distribution	/Disseminatio	
	City	State	Zip Code					30.00)
	Shreveport	LA	71104				ID: f044b2d1- bursement or (
	Purpose of Expenditure Salary		Category/ Type	001		11	17	2014	Y
	Name of Federal Candidate		s	upport	Office	e Sought:	House	District:0	00
	Ms. Mary L Landrieu		X	ppose		President	X Senate	State:L/	<u>A</u>
	Calendar Year-To-Date Per Election for Office Sought	, , ,	554635.78		Disbu 2014	ursement For: Other (Primary specify) ▶	Runoff	eral
	(a) SUBTOTAL of Itemized Independent Expenditures	š			. •	-7		100.00	
	(b) SUBTOTAL of Unitemized Independent Expenditu	res			. ▶				
	(c) TOTAL Independent Expenditures				•				
	Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized							

[Electronically Filed]

05

Date

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TEMIZED INDEPENDENT EXPENDITURI	ES			PAGE 63 OF 320
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Women Speak Out PAC			F	FEC IDENTIFICATION NUMBER ▼
Women opeak out 1 7.0				C C00530766
Check if 24-hour report 48-hour report	New re	report Amends repo		M / D = D / Y = Y = Y
Full Name of Payee Michael B Fuhrmann			M	Public Distribution/Dissemination
Mailing Address 329 Columbia St			Amoun	11 17 2014 t
	21-1-	7. 0.4.		
City Shreveport	State LA	Zip Code 71104	Transac	4.20 tion ID : efd6794d-23e3-4209-b
'				Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		X Oppose	Presider	nt Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014	
				ner (specify) Runoff
Full Name of Payee Timothy Foley				f Public Distribution/Dissemination
Moiling Address				11 17 2014
Mailing Address 20679 Glenbrook Terrace			Amoun	t
City	State	Zip Code	-	15.00
Sterling	VA	20165		tion ID: 1565c13f-a520-4a60-8 f Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M	11 17 2014
Name of Federal Candidate		Support	Office Sought	: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date		''	Disbursement	For: Primary General
Per Election for Office Sought		554635.78	2014 X Otl	her (specify) ▶Runoff
(a) SUBTOTAL of Itemized Independent Expendent	itures			19.20
(b) SUBTOTAL of Unitemized Independent Expe	nditures			
(c) TOTAL Independent Expenditures			· -	-
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authoriz			
Ms. Emily Buchanan	[Electr	ronically Filed] Date	M / 05	18 2015

Date

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

		PAGE 64 OF 320 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
		C C00530766
s repo	rt filed	on Mam / Dad / Yayayay
		Date of Public Distribution/Dissemination
		11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Amount
		100.00
		Transaction ID : 6968fdd3-f2f6-434a-b Date of Disbursement or Obligation
001		11 17 / 2014
ort	Office	e Sought: House District:00
se		President State: LA
	Disbu 2014	ursement For: Primary General ✓ Other (specify) ► Runoff
		Date of Public Distribution/Dissemination
		11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Amount
		19.50
		Transaction ID : 9accd929-4eb4-4e75-b Date of Disbursement or Obligation
002		11 17 / 2014
ort	Offic	e Sought: House District: 00
se		President X Senate State: LA
]	Disbi 2014	ursement For:
	•	119.50

Women Speak Out PAC Check if 24-hour report 48-hour report New report Amends Full Name of Payee Hannah J Landry Mailing Address 1110 N Coolidge City State Zip Code LA Gonzales 70737 Purpose of Expenditure Category/ Salary Type Name of Federal Candidate Supp Ms. Mary L Landrieu Oppo Calendar Year-To-Date 554635.78 Per Election for Office Sought Full Name of Payee Hannah J Landry Mailing Address 1110 N Coolidge Zip Code City State Gonzales LA 70737 Purpose of Expenditure Category/ Mileage Type Name of Federal Candidate Supp Ms. Mary L Landrieu Oppo Calendar Year-To-Date 554635.78 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

17

	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 65 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Nomen Speak Out PAC		C C00530766
_ Ch	heck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Mary C Lee		Date of Public Distribution/Dissemination
	Mailing Address 1030 N Coolidge Ave		11 17 2014 Amount
	City State Gonzales LA	Zip Code 70737	100.00 Transaction ID: 16962c86-27ea-4f0e-a
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 17 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Mary C Lee		Date of Public Distribution/Dissemination
	Mailing Address 1030 N Coolidge Ave		Amount
	City State	Zip Code	19.50
	Gonzales LA	70737	Transaction ID: b7384863-6341-481a-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 17 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		
			7 7 7
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
_	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date

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HEDULE E (FEC Form 3X)					
MIZED INDEPENDENT EXPENDITURES		PAGE 66	6 OI	F 320	
		FOR LINE	24 OF	FORM 3X	
	FEC ID	ENTIFICAT	LION N	UMBER ▼	
/omen Speak Out PAC		C00520766			

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee				Date of Public Distribution/Dissemination
Heather Ainsworth				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9685 Paula St				Amount
City	State	Zip Code		100.00
Keithville	LA	71047		Transaction ID : fe9dfc1e-b6cc-4067-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Landrieu		X Oppose		President Senate State: LA
Calendar Year-To-Date				rsement For: Primary General
Per Election for Office Sought		554635.78	2014	X Other (specify) ► Runoff
Full Name of Payee				Date of Public Distribution/Dissemination
Heather Ainsworth				11 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9685 Paula St				Amount
City	State	Zip Code		15.60
Keithville	LA	71047		Transaction ID : e01e83d9-203f-41d0-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 17 2014
		Турс		
Name of Federal Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Landrieu		Oppose		President Senate State: LA
Calendar Year-To-Date		554635.78	Disbu 2014	rsement For: Primary General
Per Election for Office Sought	7 7	55.5555		X Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendent	ditures		▶	115.60
(b) SUBTOTAL of Unitemized Independent Exp	enditures			
				7 7
(c) TOTAL Independent Expenditures			▶	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Ms. Emily Buchanan	[Electron	nically Filed]		5 18 2015
Signature	•	Date	, ,	2010

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party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)			
EMIZED INDEPENDENT EXPENDITURE	:S		PAGE 67 OF 320 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)			
Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼ C C00530766
check if 24-hour report 48-hour report	New	report Amends repo	rt filed on
Full Name of Payee Amanda Boley			Date of Public Distribution/Dissemination
Mailing Address Split Oak Drive			11 18 2014
Spilt Car Drive			Amount
City	State	Zip Code	67.50
charlotte	NC	28227	Transaction ID: b6073003-8fc0-41f7-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 18 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
Full Name of Payee Amanda Boley			Date of Public Distribution/Dissemination
Molling Address			11 / 18 / 2014
Mailing Address Split Oak Drive			Amount
City	State	Zip Code	17.37
charlotte	NC	28227	Transaction ID: 390bd59a-f375-4994-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 18 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	554635.78	Disbursement For:
(a) CURTOTAL of language landers and out Fundamental			0407
(a) SUBTOTAL of Itemized Independent Expendit	ures		84.87
(b) SUBTOTAL of Unitemized Independent Expen	ditures		>
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the indeper			not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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SCHEDULE E (FEC ITEMIZED INDEPENDENT

(c) TOTAL Independent Expenditures.....

MIZED INDEPENDENT EXPENI	DITURES			L	PAGE 68 FOR LINE 2	OF 320 4 OF FORM 3X
ME OF COMMITTEE (In Full)				FEC ID	ENTIFICATION	ON NUMBER ▼
omen Speak Out PAC				C	00530766	
eck if 24-hour report 48-hour	report New re	eport Amends repo	rt filed on	M = M /	D	Y Y Y
Full Name of Payee Joshua J Huffman			Da	ate of Public	Distribution/	Dissemination
Mailing Adduses				11	18	2014
Mailing Address 211 Dixie Ave			Ar	mount		
City	State	Zip Code	— F			62.50
Harrisonburg	VA	22801		nsaction ID ate of Disbur		3453-47e5-8 Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 /	18	2014
Name of Federal Candidate		Support	Office Sc	ught:	House	District: 00
Name of Federal Candidate Ms. Mary L Landrieu		Support Oppose		_	House Senate	District:00 State:LA
			Disburser	_	Senate Primary	State:
Ms. Mary L Landrieu Calendar Year-To-Date		X Oppose	Disburser 2014	esident X	Senate Primary	State: LA General
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee		X Oppose	Disburser 2014	ment For: Other (speciate of Public	Senate Primary ecify) ▶ Distribution/	State: LA General Runoff Dissemination
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin	State	X Oppose	Disburser 2014	ment For: Other (speate of Public	Senate Primary ecify) ▶ Distribution/	State: LA General Runoff Dissemination
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City New Orleans	State LA	Oppose 554635.78	Disburser 2014 A	ment For: Other (speate of Public M 11 mount	Senate Primary pecify) ▶ Distribution/ 18 : d996caa3-	State: LA General Runoff Dissemination Y 2014 60.00 6039-4910-b
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City		Oppose 554635.78 Zip Code	Disburser 2014 A	esident ment For: Other (speate of Public 11 mount	Senate Primary pecify) ▶ Distribution/ 18 : d996caa3-	State: LA General Runoff Dissemination Y 2014 60.00 6039-4910-b
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City New Orleans Purpose of Expenditure		Zip Code 70188 Category/	Disburser 2014 Disburser Tra	ment For: Other (speate of Public Manual Man	Senate Primary pcify) ▶ Distribution/ 18 : d996caa3- resement or C	State: LA General Runoff Dissemination Y 2014 60.00 6039-4910-b Obligation
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City New Orleans Purpose of Expenditure Salary		Zip Code 70188 Category/ Type 001	Disburser 2014 Disburser 2014 Disburser 2014 Disburser 2014	ment For: Other (speate of Public Manual Man	Senate Primary ecify) Distribution/ 18 : d996caa3- sement or C	State: LA General Runoff Dissemination 2014 60.00 6039-4910-b Obligation
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Antoinette Franklin Mailing Address 8822 Apple St City New Orleans Purpose of Expenditure Salary Name of Federal Candidate		Zip Code 70188 Category/ Type Output Support	Disburser 2014 Disburser 2014 Ar Tra Disburser Disburser 2014	ment For: Other (speciate of Public mount nsaction ID ate of Disburt of Disb	Senate Primary pecify) ▶ Distribution/ 18 18 House Senate Primary	State: LA General Runoff Dissemination Y 2014 60.00 6039-4910-b Obligation Y 2014 District: 00 State: LA

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan [Electronically Filed]	Date	05	18	/	2015
Signature					

ΤÉ	EMIZED INDEPENDENT EXPENDI	TURES				69 OF 320 NE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Vomen Speak Out PAC				FEC IDENTIFIC	ATION NUMBER ▼
VV	omen opeak out i Ao				C C0053076	36
Che	eck if 24-hour report 48-hour re	eport New repo	port Amends repo	ort filed on	M = M / D = D	/
П	Full Name of Payee			Date	e of Public Distribut	tion/Dissemination
	Antoinette Franklin				M M / D D D 18	2014
	Mailing Address 8822 Apple St			Amo	ount	
ŀ	City	State	Zip Code			12.00
	New Orleans	LA	70188		saction ID : ad2793 e of Disbursement	371-feb5-4663-8
Ī	Purpose of Expenditure Mileage		Category/ Type 002		M M / D D D 11	/ Y Y Y Y Y 2014
ŀ	Name of Federal Candidate		Support	Office Soug	ght: House	District: 00
	Ms. Mary L Landrieu		X Oppose	Presi		e State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	ent For: Prim Other (specify) ▶	nary General Runoff
ľ	Full Name of Payee Tammay Williams				te of Public Distribu	tion/Dissemination
ľ	Mailing Address 924 N. Prieur St			Amo	ount	2015
ŀ	City	State	Zip Code	$ \Gamma$		80.00
	New Orleans	LA	70116		saction ID: 329687 e of Disbursement	
	Purpose of Expenditure Salary		Category/ Type 001		11 / 18	2014
ľ	Name of Federal Candidate		Support	Office Sou	ight: House	e District: 00
	Ms. Mary L Landrieu		X Oppose	Presi	sident X Senate	e State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	nent For: Prin	nary General Runoff
((a) SUBTOTAL of Itemized Independent Ex	expenditures		. [92.00
	(b) SUBTOTAL of Unitemized Independent	+ Evnanditurae				
'	(D) SUBTUTAL OF OTHER HIZER HIGEPENGON	Experiultures		.	7	3
((c) TOTAL Independent Expenditures			·· •	4	, , ,
٧	Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party commit	ny candidate or authorized				
	Ms. Emily Buchanan	[Electron	nically Filed]	м м м м м м м м м м м м м м м м м м м	/ D.D. / Y.	2015
	Signature		Date	3 02	10	2013

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Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 70 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Nomen Speak Out PAC		C C00530766
heck if 24-hour report 48-hour report New report	ort Amends repor	rt filed on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Tammay Williams		11 18 2014
Mailing Address 924 N. Prieur St		Amount
City State	Zip Code	15.00
New Orleans LA	70116	Transaction ID : 4ef025f9-09e3-4865-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 18 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
Full Name of Payee Francesca Blom		Date of Public Distribution/Dissemination
Mailing Address 101 Asbury Ct		11 18 2014 Amount
City State	Zip Code	75.00
Winchester VA	22602	Transaction ID : 69d643d0-95de-4105-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		90.00
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

05

Date

18

	PAGE		•	320	_		
	FOR LI	NE 24	OF FO	ORM 3X			
, IL	NIDENTIFICATION NUMBER W						

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Eva M Johnston Mailing Address 2547 N 474b St		11 18 2014
2517 N 47th St		Amount
City State	Zip Code	25.00
Milwaukee WI	53210	Transaction ID : 2e219066-8e9c-4319-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
Name of Federal Candidate	Support Offi	ce Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Dis 554635.78 201	bursement For: Primary General Value Other (specify) ► Runoff
5 H.M. (D		Cuter (Speelly) F
Full Name of Payee Noah J Smith		Date of Public Distribution/Dissemination
Mailing Address 41174 Bertville Rd		Amount
City State	Zip Code	25.00
Gonzales LA	70737	Transaction ID : edc2187b-4ff7-4023-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	M 11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 20°	bursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	50.00
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures	·····	
		4 1 4
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015
Signature		

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 72 OF 320 FOR LINE 24 OF FORM 3X
N/	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New r	report Amends rep	ort filed on
	Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
	Mailing Address 110 W Pecan St		11 18 2014 Amount
	City State Ville Platte LA	Zip Code 70586	50.00 Transaction ID : 8022696e-fc88-4934-8
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 18 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Christopher Marquess Mailing Address 110 W Pecan St		Date of Public Distribution/Dissemination M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	37.20
	Ville Platte LA	70586	Transaction ID: 87b85ccb-5b85-4280-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 87.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		-
	(c) TOTAL Independent Expenditures		· ·
	Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		

[Electronically Filed]

05

Date

18

	PAGE FOR LI	73 NF 24	01	320 DBM 3X		
FOR LINE 24 OF FORM 3X DENTIFICATION NUMBER ▼						

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	port Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
Mailing Address 110 W Pecan St		11 18 2014 Amount
City State Ville Platte LA	Zip Code 70586	50.00 Transaction ID : 75ce202f-d427-4b98-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
Name of Federal Candidate	Support Off	ice Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis	sbursement For:
Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
Mailing Address 110 W Pecan St		Amount
City State	Zip Code	37.20
Ville Platte LA	70586	Transaction ID: 409d2c50-fa67-404e-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District:00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 14 ✓ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	87.20
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015
Signature		

TE	EMIZED INDEPENDENT EXPENI	DITURES			PAGE 74 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)			FEC	C IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC			С	C00530766
Ch	heck if 24-hour report 48-hour	r report New repo	ort Amends repo	ort filed on	/ D D / Y Y Y Y
	Full Name of Payee			Date of Pu	ublic Distribution/Dissemination
	Donna S Wilson			M M M	18 2014
	Mailing Address 4456 Country Hill Dr			Amount	
	City	State	Zip Code		10.00
	Baton Rouge	LA	70816		n ID : ac0386eb-bef9-4f68-b isbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	M - M 11	
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		X Oppose	President	X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	7 7 7	554635.78	Disbursement For 2014	or: Primary General (specify) ► Runoff
	Full Name of Payee Donna S Wilson			Date of Po	rublic Distribution/Dissemination
	Mailing Address 4456 Country Hill Dr			Amount	
	City	State	Zip Code		7.20
	Baton Rouge	LA	70816		on ID : 74885bd9-c4a5-44a2-9 Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	M M M	
	Name of Federal Candidate		Support	Office Sought:	House District:00
	Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement Fo 2014 Other	or: Primary General (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent	Expenditures		.	17.20
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		· •	Apr. 1 Apr. 1 Apr. 1
	(c) TOTAL Independent Expenditures			·	27. 1 27. 1
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party committee	any candidate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed] Date	05 4	8 2015
	Signature		_ Date	, , ,	

PAGE	75	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New re	port Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee Francis Richardson		Date of Public Distribution/Dissemination
Mailing Address 220 Doucet Rd		11 18 2014 Amount
City State Lafayette LA	Zip Code 70503	35.00 Transaction ID: 078279d3-cd44-49ea-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
Name of Federal Candidate	Support Off	ice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	sbursement For: Primary General 14
Full Name of Payee Francis Richardson		Date of Public Distribution/Dissemination
Mailing Address 220 Doucet Rd		Amount
City State	Zip Code	0.81
Lafayette LA	70503	Transaction ID: 54b2e827-3946-42d2-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose □	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 14
(a) SUBTOTAL of Itemized Independent Expenditures	>	35.81
(b) SUBTOTAL of Unitemized Independent Expenditures		
	•	7 7
(c) TOTAL Independent Expenditures	>	7 7 7
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electro.	nically Filed] Date	05 18 2015
Signature		

TEMIZ	ZED INDEPENDENT EXPEND	NTURES			PAGE 76 FOR LINE	OF 320 24 OF FORM 3X
	OF COMMITTEE (In Full)				FEC IDENTIFICATI	ION NUMBER ▼
Won	men Speak Out PAC				C C00530766	
Check	if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M = M / D = D /	Y I Y I Y I Y
	II Name of Payee imothy Foley			Da	ate of Public Distribution	n/Dissemination
Ма	ailing Address 20679 Glenbrook Terra	ece			11 19	2014
				An	nount	
Cit	īy	State	Zip Code			15.00
	erling	VA	20165		nsaction ID : a34ce1c1 ate of Disbursement or	
_	ırpose of Expenditure alary		Category/ Type 001		11 / 19	2014
Na	ame of Federal Candidate		Support	Office Sou	ught: House	District:00
Ms	s. Mary L Landrieu		X Oppose	Pre	esident X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	ment For: Primary Other (specify) ▶	y General Runoff
	Name of Payee Colton R Overcash			Da	ate of Public Distribution	n/Dissemination 2014
Ма	ailing Address 121 Ohara Dr			An	mount	
Cit	<u></u>	State	Zip Code	— Г		96.00
Cit Sa	alisbury	NC	28147		nsaction ID : b9f8b1bf- ate of Disbursement or	-d659-4b38-a
	urpose of Expenditure alary		Category/ Type 001		11 18	2014
Na	ame of Federal Candidate		Support	Office Sou	ought: House	District:00
M:	ls. Mary L Landrieu		Oppose	Pre	esident Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursen 2014	ment For: Primar Other (specify) ▶	General Runoff
(a)	SUBTOTAL of Itemized Independent	Expenditures				111.00
(b)	SUBTOTAL of Unitemized Independent	nt Expenditures				
(c)	TOTAL Independent Expenditures					
with,	der penalty of perjury I certify that the a, or at the request or suggestion of, a ty committee) any political party comm	any candidate or authorized				
	Ms. Emily Buchanan	[Electron	ically Filed]		/ DID / YIY 18 20	15
ξ	Signature		Date	, 00	10 20	10

PAGE	77		320
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	ort Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Colton R Overcash Mailing Address 134 Obers Dr		11 18 2014
121 Ohara Dr		Amount
City State	Zip Code	65.70
Salisbury	28147	Transaction ID : 5d33a7c3-15a5-46dc-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 18 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disl 201	bursement For: Primary General
Full Name of Payee		
Felicia A Jones		Date of Public Distribution/Dissemination M M 19 2014
Mailing Address 4106 Martha St		Amount
City State	Zip Code	80.00
Shreveport LA	71109	Transaction ID : 817f5da6-f8a8-4dc5-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
Name of Federal Candidate	Support Offi	ce Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	bursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	145.70
(b) SUBTOTAL of Unitemized Independent Expenditures		
		7 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed]	05 18 2015
Signature	_	

PAGE		OF	
FOR L	INE 24	OF	FORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New re	eport Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones Mailing Address 4406 Morths St		11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
4106 Martha St		Amount
City State	Zip Code	8.40
Shreveport LA	71109	Transaction ID : dd400484-a9c8-41ed-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 19 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dist 201	bursement For: Primary General
Full Name of Payee		Date of Public Distribution/Dissemination
Julia Perry		11 19 2014
Mailing Address 2046 Perrin St Apt C		Amount
City State	Zip Code	100.00
Shreveport LA	71101	Transaction ID : b8d973e8-5e6d-49a0-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
Name of Federal Candidate	Support Offi	ce Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	bursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		108.40
(1) OUDTOTAL (11): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(b) SUBTOTAL of Unitemized Independent Expenditures	•	1 4 4 4
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electro	onically Filed]	05 18 2015
Signature		

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURE	is		PAGE 79 OF 320		
WANT OF COMMITTEE (In E.III)			FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full) Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼		
			C C00530766		
Check if 24-hour report 48-hour report	New	report Amends report	ort filed on		
Full Name of Payee Julia Perry			Date of Public Distribution/Dissemination		
Mailing Addrass			11 19 / 2014		
2046 Perrin St Apt C			Amount		
City	State	Zip Code	10.50		
Shreveport	LA	71101	Transaction ID : 2a6d7fa0-58dc-42e4-a Date of Disbursement or Obligation		
Purpose of Expenditure Mileage		Category/ Type 002	11 19 2014		
Name of Federal Candidate		Support	Office Sought: House District: 00		
Ms. Mary L Landrieu		Oppose	President X Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 Runoff		
Full Name of Payee			Date of Public Distribution/Dissemination		
Christopher L Gilbert			11 18 2014		
Mailing Address 55 Lovell Johnson Rd			Amount		
City	State MS	Zip Code 39466	80.00 Transaction ID: e61a59eb-20fd-4317-8		
Picayune		39400	Date of Disbursement or Obligation		
Purpose of Expenditure Salary		Category/ Type 001	11 / 18 / 2014		
Name of Federal Candidate		Support	Office Sought: House District: 00		
Ms. Mary L Landrieu		Oppose	President State: LA		
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014		
rei Election foi Onice Sought	7		Other (specify) ►Runoff		
(a) SUBTOTAL of Itemized Independent Expendit	tures		90.50		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			•		
	lidate or authori		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political		
Ms. Emily Buchanan	[Elec:	tronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Cianatura		Date			

П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)			
TΕ	EMIZED INDEPENDENT EXPENDITURES			PAGE 80 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)			
	Vomen Speak Out PAC			FEC IDENTIFICATION NUMBER ▼
				C C00530766
Ch	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
	Full Name of Payee Christopher L Gilbert			Date of Public Distribution/Dissemination
	Mailing Address			11 / 18 / 2014
	55 Lovell Johnson Rd			Amount
	City State	Zip Code		45.00
	Picayune MS	39466		ransaction ID : 5db6da3e-1f74-4af0-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002		M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 1 8 2014
	Name of Federal Candidate	Support	Office	Sought: House District: 00
	Ms. Mary L Landrieu	Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	sement For:
	Full Name of Payee			Date of Public Distribution/Dissemination
	Christine Stevens			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 100 Asbury Ct			Amount
		7: 0 !		70.00
	City State Winchester VA	Zip Code		70.00 Fransaction ID: 4b0ab6d8-0ee4-4a81-8
		22602		Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 18 2014
	Name of Federal Candidate	Support	Office	Sought: House District: 00
	Ms. Mary L Landrieu	Oppose		President Senate State: LA
	Calendar Year-To-Date			sement For: Primary General
	Per Election for Office Sought	554635.78	2014	X Other (specify) ►Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶	115.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		🕨	
	(c) TOTAL Independent Expenditures		··· •	1 4 1 4 1 4
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			

[Electronically Filed]

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)			
	EMIZED INDEPENDENT EXPENDITURES			PAGE 81 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC			C C00530766
				M = M / D = D / Y = Y = Y
Cr	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed	on
	Full Name of Payee Jon E Conner			Date of Public Distribution/Dissemination
				11 18 2014
	Mailing Address 100 Asbury Ct			Amount
	City State	Zip Code		70.00
	Winchester VA	22602		Transaction ID: 0ff1fa74-338b-4b46-b Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	\neg	M M / D D / Y Y Y
	Salary	Type 001		11 18 2014
	Name of Federal Candidate	Support	Office	Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbu 2014	rrsement For: Primary General
	Full Name of Payee Rodney D Culbreth			Date of Public Distribution/Dissemination
	Mailing Address			11 18 2014
	100 Asbury C1			Amount
	3200 Dam Neck Rd City State	Zip Code		70.00
	Winchester VA	22602		Transaction ID: 49d8ee7d-0f1d-4a8e-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 18 2014
	Name of Federal Candidate	Support	Office	e Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose		President Senate State: LA
	Colondor Voor To Data		Dish	ursement For: Primary General
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	
	(a) SUBTOTAL of Itemized Independent Expenditures		▶	140.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •	
	(a) TOTAL Independent Expanditures			
	(c) TOTAL Independent Expenditures		·· •	7 7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			

[Electronically Filed]

05

Date

18

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 82 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		
		C C00530766
heck if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
Full Name of Payee Jazmine d Conner		Date of Public Distribution/Dissemination
Mailing Address 100 ASBURY CT		11 18 2014
IN ASDURT CI		Amount
City State	Zip Code	70.00
WINCHESTER VA	22602	Transaction ID: e98dbe52-d463-40b7-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 / 2014
Name of Federal Candidate	Support	Office Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
Per Election for Office Sought	001000.15	Other (specify) ► Runoff
Full Name of Payee Rze Culbreath		Date of Public Distribution/Dissemination
		11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 Asbury Ct		Amount
City State	Zip Code	70.00
Winchester VA	22602	Transaction ID: 59b39fe1-a7cb-4ebd-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Office Sought: House District: 00
Ms. Mary L Landrieu	Support	Office Sought. Plouse District.
No. Mary E Editario	Oppose	Fresident State.
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
Per Election for Onice Sought	00.17	Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		140.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

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Date

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	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 83 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V	Nomen Speak Out PAC		C C00530766
 Ch	heck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Rodney O Culbreath		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		11 18 2014 Amount
			, unoun
	City State Winchester VA	Zip Code 22602	70.00 Transaction ID: 65a04e44-cd69-494e-9
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 18 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Runoff
	Full Name of Payee Alice K Salazar		Date of Public Distribution/Dissemination 11 18 2014
	Mailing Address 605 W Houston St		Amount
	City State	Zip Code	70.00
	Marshall TX	75633	Transaction ID: 803475f4-f277-4e06-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		
	, , , ,		7 7 7
	(b) SUBTOTAL of Unitemized Independent Expenditures		-
	(c) TOTAL Independent Expenditures		· · · · · · · · · · · · · · · · · · ·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)						
EMIZED INDEPENDENT EXPENDITURES					PAGE 84	OF 320 24 OF FORM 3X
AME OF COMMITTEE (In Full)				EEC		ON NUMBER ▼
Nomen Speak Out PAC				C	C00530766	JN NOMBER V
heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M	/ D = D /	Y Y Y
Full Name of Payee			D	ate of Pub	olic Distribution/	Dissemination
Alice K Salazar				11	18	2014
Mailing Address 605 W Houston St			А	mount		
City S	tate	Zip Code				48.90
	ГХ	75633			ID: 0135de0e- bursement or 0	
Purpose of Expenditure Mileage		Category/ Type 002		11	18	2014
Name of Federal Candidate		Support	Office S	ought:	House	District: 00
Ms. Mary L Landrieu		X Oppose	Pr	esident	Senate	State:LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014 _	ement For: Other (General Runoff
Full Name of Payee					olic Distribution	/Dissemination
Jessica R Resendiz				M M M	/ 0 0 /	2014
Mailing Address 9685 Paula St			Д	mount		
City S	tate	Zip Code	<u> —</u> г			90.00
	LA	71047			ID: 8229d69a- bursement or (∙0a32-416c-b
Purpose of Expenditure Salary		Category/ Type 001		M = M 11	18	2014
Name of Federal Candidate		Support	Office S	onapt.	House	District:00
Ms. Mary L Landrieu		Oppose		esident	Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ement For:	Primary specify) ▶	General Runoff
,	,			<u> </u>	specify)	
(a) SUBTOTAL of Itemized Independent Expenditures						138.90
(b) SUBTOTAL of Unitemized Independent Expenditures	s					
					<i></i>	
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independent of with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized					

[Electronically Filed]

FEC Schedule E (Form 3X) Rev. 09/2013

2015

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Date

S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)					
TΕ	EMIZED INDEPENDENT EXPENDITURES	ı			PAGE 85	OF 320
\IZ	AME OF COMMITTEE (In Full)					OF FORM 3X
	Vomen Speak Out PAC			FE	EC IDENTIFICATION	N NUMBER ▼
_					C00530766	
Ch	neck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D /	Y Y Y Y Y
	Full Name of Payee			Date of I	Public Distribution/D	issemination
	Jessica R Resendiz			11		2014
	Mailing Address 9685 Paula St			Amount		
	City	State	Zip Code			25.80
	Keithville	LA	71047		on ID: 197d7433-16 Disbursement or Ob	ed5-483a-9
	Purpose of Expenditure		Category/	М -	M / D D /	Y Y Y Y
	Mileage		Type 002		18	2014
	Name of Federal Candidate		Support	Office Sought:	House D	istrict: 00
	Ms. Mary L Landrieu		X Oppose	President	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought	, , ,	554635.78	Disbursement F 2014 Othe	or: Primary er (specify) ▶	General Runoff
	Full Name of Payee			Date of	Public Distribution/D	issemination
	Sheri J Peace			M		Y Y Y Y Y Y Y Y Y Y
	Mailing Address 9685 Paula St				18	2014
				Amount		
	City	State	Zip Code			90.00
	Keithville	LA	71047		on ID: 7c957ffd-22 Disbursement or Ob	
	Purpose of Expenditure Salary		Category/ Type 001	M 1	M / D D / 18	2014
	Name of Federal Candidate		Support	Office Sought:	House D	istrict: 00
	Ms. Mary L Landrieu		Oppose	President		State: LA
			Z oppose			
	Calendar Year-To-Date Per Election for Office Sought	<u> </u>	554635.78	Disbursement F	For: Primary er (specify) ▶	General Runoff
_				Z Ouite	er (specify) =	
	(a) SUBTOTAL of Itemized Independent Expenditure	es		· •	7 7 .	115.80
	(b) SUBTOTAL of Unitemized Independent Expendit	tures		·· -	7	1 400
	(c) TOTAL Independent Expenditures					
	., , , , , , , , , , , , , , , , , , ,			, L.	7	
	Under penalty of perjury I certify that the independent	ent expenditures	reported herein were	not made in coo	peration. consultation	on, or concert
	with, or at the request or suggestion of, any candida	ate or authorized				

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Date

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	age# 15951393195				
	CHEDULE E (FEC Form 3X)				
TE	EMIZED INDEPENDENT EXPENDITURES				PAGE 86 OF 320
NI/	AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) Vomen Speak Out PAC				FEC IDENTIFICATION NUMBER ▼
V	vomen opeak out i Ao				C C00530766
Ch	neck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	i on Man / Dad / Yayayay
	Full Name of Payee				Date of Public Distribution/Dissemination
	Theresa a Youngblood				11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 102 S Main Street Apt A2				Amount
	City St	ate	Zip Code		100.00
		Ά	22611		Transaction ID: 342a199b-22ce-4028-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Offic	e Sought: House District:00
	Ms. Mary L Landrieu		X Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	ursement For: Primary General Nother (specify) ► Runoff
	Full Name of Payee Carl Brent				Date of Public Distribution/Dissemination 11 18 2014
	Mailing Address 6718 Lake Willow Dr				Amount
	City	tate	Zip Code		80.00
	New Orleans	_A	70126		Transaction ID : 22f279b5-ebe9-481c-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		11 18 / 2014
	Name of Federal Candidate		Support	Offic	e Sought: House District:00
	Ms. Mary L Landrieu		Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	ursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures			·· •	180.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	;		·· •	
	(c) TOTAL Independent Expenditures			·· •	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						

party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 87 OF 320
			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC		C C00530766
Ch	neck if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
	Full Name of Payee Carl Brent		Date of Public Distribution/Dissemination
	Mailing Address 6718 Lake Willow Dr		Amount
	City	Zin Codo	15.60
	City State New Orleans LA	Zip Code 70126	Transaction ID : 70615535-1f4f-4a4e-8
	11011 01100110	10120	Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Felicia A Jones		11 18 2014
	Mailing Address 4106 Martha St		Amount
	City State	Zip Code	80.00
	Shreveport LA	71109	Transaction ID : cb8f1d4f-1e5b-4945-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		
	(4) 002 10 112 01 10111200 1100011 2.50011111001111111111111111111111111111		7 7 7
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		·
	Under penalty of perjury I certify that the independent expenditures	reported herein were	not made in cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political

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Date

	PAGE 88 FOR LINE 24	OF 4 OF FO	320 DRM 3X	-
D	ENTIFICATIO	N NUM	BER ▼	

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee Felicia A Jones	Date of Public Distribution/Dissemination
Mailing Address 44.06 Months St	11 18 2014
4106 Martha St	Amount
City State Zip Code	8.40
·	Transaction ID : 34cecbcd-6acb-4d91-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 18 2014
Name of Federal Candidate Support Office	Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	rsement For:
Full Name of Page	Cirici (Specify)
Full Name of Payee Gregory Green	Date of Public Distribution/Dissemination 11 18 2014
Mailing Address 2506 Bolch Street	11 18 2014 Amount
City State Zip Code	80.00
Shreveport LA 71104	Transaction ID: 3362366c-6bd2-4eb4-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M 11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:00
Mo Monul Landricu	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary General ✓ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	88.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	5 18 2015
Signature	

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Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 89 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amends	report filed on M M M / D D / Y Y Y Y Y Y
Full Name of Payee Gregory Green	Date of Public Distribution/Dissemination
Gregory Green	11 18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2506 Bolch Street	Amount
City State Zip Code	43.20
Shreveport LA 71104	Transaction ID: b3141f3f-609d-4f70-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	002 11 18 2014
Name of Federal Candidate Suppor	rt Office Sought: House District: 00
Ms. Mary L Landrieu Oppos	e President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Lilly Green	11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 205 Medallion Circle	Amount
City State Zip Code	80.00
Shreveport LA 71119	Transaction ID : 4d532fa3-badf-4e2b-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 11 / 18 / 2014
Name of Federal Candidate Suppo	rt Office Sought: House District: 00
Ms. Mary L Landrieu Oppos	
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought 554635.78	2014
(a) SUBTOTAL of Itemized Independent Expenditures	123.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein w with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.	

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Date

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NAME OF COMMITTEE (In Full) Women Speak Out PAC

PAGE 90 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
ed on M = M / D = D / Y = Y = Y
Date of Public Distribution/Dissemination
11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Amount
54.30 Transaction ID: 62f4410c-6c72-4d7f-b Date of Dishurament or Obligation
Date of Disbursement or Obligation 11 18 2014
ice Sought: House District: 00
President X Senate State: LA
Sbursement For: Primary General 4
Date of Public Distribution/Dissemination
11 18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Amount
25.00
Transaction ID : aa9abab4-c79a-4cd4-a Date of Disbursement or Obligation
11 18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
fice Sought: House District: 00
President Senate State: LA
sbursement For: Primary General
Other (specify) ►Runoff
79.30
1

		C C00530766
check if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Lilly Green		11 18 / 2014
Mailing Address 205 Medallion Circle		Amount
City State	Zip Code	54.30
Shreveport LA	71119	Transaction ID: 62f4410c-6c72-4d7f-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
5 11 11 12		Other (speerly) P
Full Name of Payee Jeanne Tribou		Date of Public Distribution/Dissemination
Mailing Address 22369 Ponderosa Dr.		11 18 2014
		Amount
City State	Zip Code	25.00
Mandeville LA	70471	Transaction ID : aa9abab4-c79a-4cd4-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		79.30
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	ically Filed] Date	05 18 2015
Signature	_ 5410	

PAGE	91	OF	
FOR L	NE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed	on
Full Name of Payee		Date of Public Distribution/Dissemination
Jeanne Tribou Mailing Address 22250 Readerses Pr		11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
22369 Ponderosa Dr.		Amount
City State Zip	p Code	7.80
	0471	Transaction ID: 9c85cc03-f289-45c0-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	e Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbu 554635.78 2014	ursement For: Primary General
Full Name of Payee		
Cynthia N Schmit		Date of Public Distribution/Dissemination 11 18 2014
Mailing Address 2226 Taft Circle Apt 1		Amount
City State Zi	p Code	22.50
Winchester VA 22	2601	Transaction ID: c4c36e8e-00d8-4c3e-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 18 2014
Name of Federal Candidate	Support Office	e Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disb 2014	ursement For: Primary General Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	30.30
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
	·	4 4
(c) TOTAL Independent Expenditures	·····	7 7
Under penalty of perjury I certify that the independent expenditures repuit, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronical	<i>lly Filed]</i> Date □	5 18 2015
Signature	2010	

PAGE	92	OF	320
FOR LI	NE 24	OF	FORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Cynthia J Christmas Mailing Address 4704 Functions St	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1731 Frenchmen St	Amount
City State Zip Co	ode 65.00
New Orleans LA 70116	6 Transaction ID : 5b04a487-3b1a-4a5a-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cate	egory/ Type 001 11 17 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 5546	Disbursement For: Primary General 2014
Full Name of Payee Cynthia J Christmas	Date of Public Distribution/Dissemination
Mailing Address 1731 Frenchmen St	Amount
City State Zip C	Code 12.00
New Orleans LA 7011	Transaction ID : bd443ed8-383a-415e-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Cate	egory/ Type 002 11 17 / Y Y Y Y Y 11 17 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554	Disbursement For: Primary General 2014 Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	77.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized commparty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically F	Filed] Date 05 18 2015
Signature	

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURE	<u>E</u> S		PAGE 93 OF 320		
			FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
Women Speak Out PAC			C C00530766		
Check if 24-hour report 48-hour report	New	report Amends report	filed on M = M / D = D / Y = Y = Y		
Full Name of Payee			Date of Public Distribution/Dissemination		
Elvis Spears			11 18 2014		
Mailing Address 2150 Hope St			Amount		
Cit. ·	State	Zip Code	80.00		
City New Orleans	State LA	70119	Transaction ID : d2b52d52-1f45-47bb-8 Date of Disbursement or Obligation		
Purpose of Expenditure Salary		Category/ Type 001	11 18 2014		
Name of Federal Candidate		Support	Office Sought: House District: 00		
Ms. Mary L Landrieu		∑ Oppose	President Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: Primary General		
-			X Other (specify) ▶ Runoff		
Full Name of Payee Elvis Spears			Date of Public Distribution/Dissemination		
Mailing Address 2150 Hope St					
· ·			Amount		
City	State	Zip Code	12.60		
New Orleans	LA	70119	Transaction ID: 1eb6247d-0184-4782-9 Date of Disbursement or Obligation		
Purpose of Expenditure Mileage		Category/ Type 002	11 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate		Support	Office Sought: House District: 00		
Ms. Mary L Landrieu		X Oppose	President Senate State: LA		
Calendar Year-To-Date			Disbursement For: Primary General		
Per Election for Office Sought		554635.78	2014		
(a) SUBTOTAL of Itemized Independent Expendit	tures		92.60		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
(b) TOTAL IIIGOPOTAGIN EXPONENTIA			<u> </u>		
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any canon party committee) any political party committee or	didate or authori				
Ms. Emily Buchanan	[Elec:	tronically Filed] Date	05 18 2015		
Cianatura					

Signature

SCHEDULE E (FEC Form 3X)

	SHEDOLL L (FLO FOIIII 3X)			
TΕ	EMIZED INDEPENDENT EXPENDITURES			PAGE 94 OF 320 FOR LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)		FFC II	DENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC			C00530766
Ch	neck if 24-hour report 48-hour report New report	port Amends repo	ort filed on	/ D = D / Y = Y = Y
П	Full Name of Payee		Date of Public	c Distribution/Dissemination
	Heather Ainsworth		11	18 2014
	Mailing Address 9685 Paula St		Amount	
	City State	Zip Code		100.00
	Keithville LA	71047	Transaction IE	D : 44428f79-f546-455e-b
		1		ursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11	18 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu	Oppose		Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: 2014	Primary General Runoff
	Full Name of Payee			
	Heather Ainsworth		M = M	c Distribution/Dissemination
	Mailing Address 9685 Paula St		11	18 2014
			Amount	
	City State	Zip Code		16.20
	Keithville LA	71047		D: 77d1ac5a-eeac-48b8-9 ursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11	18 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu	Oppose		Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: 2014 Other (sp	Primary General Decify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures			116.20
	(a) SUBTUTAL OF REHIEZED HIDEPORDORIC EXPONDITURES		-	110.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		• •	7
	(c) TOTAL Independent Expenditures		•	1 1 2 1 1 2 1
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
	Ms. Emily Buchanan [Electron	nically Filed] Date	05 18	/ Y Y Y Y Y Y Y 2015

TI	EMIZED INDEPENDENT EXPENI	DITURES			PAGE 95 OF 320 FOR LINE 24 OF FORM 3X	
	AME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼	
۷	Women Speak Out PAC					
Cł	heck if 24-hour report 48-hour	r report New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y	
	Full Name of Payee			Date of I	Public Distribution/Dissemination	
	American Airlines			M 11		
	Mailing Address PO Box 619616 MD 56	ô 7 5		Amount		
	City	State	Zip Code	-	244.20	
	DW Airport	TX	75261		on ID: eba8fb66-cc8e-47b5-a Disbursement or Obligation	
	Purpose of Expenditure Travel		Category/ Type 004	M 11	M / D D / Y Y Y Y	
	Name of Federal Candidate		Support	Office Sought:	House District: 00	
	Mr. Greg Orman		Oppose	President		
	Calendar Year-To-Date Per Election for Office Sought		261541.03	Disbursement F 2014 Othe	For: Primary X General er (specify) ▶ Runoff	
	Full Name of Payee Orbitz			Date of	Public Distribution/Dissemination	
	Mailing Address 500 W Madison			Amount		
	1000 City	State	Zip Code		544.70	
	Chicago	IL	60661		ion ID : e9b56cf7-f8cc-4a91-9 Disbursement or Obligation	
	Purpose of Expenditure Travel		Category/ Type 004	Date of	M / D D / Y Y Y	
	Name of Federal Candidate		Support	Office Sought:	House District:00	
	Mr. Greg Orman		X Oppose	President	Senate State: KS	
	Calendar Year-To-Date Per Election for Office Sought		261541.03	Disbursement F 2014 Other	For: Primary X General er (specify) ► Runoff	
	(a) SUBTOTAL of Itemized Independent	Expenditures		· -	788.90	
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		· •	7 1 7 1 7	
	(c) TOTAL Independent Expenditures			· •	7	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Ms. Emily Buchanan	[Electroni	ically Filed] Date	M M / D	18 2015	
	Signature		_ Date	' L L		

TEMIZED INDEPE	NDENT EXPEND	DITURES				PAGE 96 FOR LINE 2	OF 320 4 OF FORM 3X
NAME OF COMMITTE					FEC IDE	ENTIFICATIO	ON NUMBER ▼
Women Speak	Out PAC				Cc	00530766	
Check if 24-hour	report 48-hour	report New repo	ort Amends repo	ort filed on	M = M /	D II D /	Y II Y II Y
Full Name of Paye Orbitz	:e			Da	ate of Public	Distribution/I	Dissemination
Mailing Address ,					11	19	2014
1	500 W Madison			Ar	mount		
City	1000	State	Zip Code	— Г			544.70
Chicago		IL	60661		insaction ID :		63f1-49e6-b
Purpose of Expend Travel	diture		Category/ Type 004		11 /	19	2014
Name of Federal 0	Sandidate		Support	Office So	ought:	House [District: 00
Mr. Greg Orman			Oppose		esident X	_ Z1	State: KS
Calendar Year Per Election f	r-To-Date for Office Sought		261541.03	Disburser 2014	ment For:	Primary ecify) ▶	General Runoff
Full Name of Payer Delta	;e			Da	ate of Public	Distribution/	Dissemination 2014
Mailing Address	PO Box 20706			Ar	mount		
City		State	Zip Code	— Г			789.20
Atlanta		GA	30320		ansaction ID		e29b-4c06-a
Purpose of Expend Travel	diture		Category/ Type 004		M M /	19	2014
Name of Federal (Candidate		Support	Office Sc	ought:	House	District:00
Mr. Greg Orman			X Oppose	Pre	esident X	<u></u>	State: KS
Calendar Yea Per Election f	r-To-Date for Office Sought		261541.03	Disburser 2014	ement For:	Primary ecify) ▶	General Runoff
(a) SUBTOTAL of	Itemized Independent	Expenditures			1 1 7	7	1333.90
(b) SUBTOTAL of	Unitemized Independe	ent Expenditures		•			
(c) TOTAL Indepen	dent Expenditures			· • [
with, or at the reque		e independent expenditures any candidate or authorized nittee or its agent.					
Ms. Em	nily Buchanan	[Electron	ically Filed]	M M M	/ D D D	/ Y Y Y	
Signature			Date	05	18	2018	,

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Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)		
ΤI	EMIZED INDEPENDENT EXPENDITURES		PAGE 97 OF 320
\I /	AME OF COMMITTEE (In Full)		FOR LINE 24 OF FORM 3X
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
_			C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	United Airlines		11 19 / 2014
	Mailing Address PO Box 66100		Amount
	City State	Zip Code	598.20
	Chicago IL	60666	Transaction ID : ca43f31e-22a0-457c-a Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
	Travel	Type 004	11 19 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Mr. Greg Orman	Oppose	President Senate State: KS
	Calendar Year-To-Date Per Election for Office Sought	261541.03	Disbursement For: Primary
	Full Name of Payee United Airlines Mailing Address RO Box 66100		Date of Public Distribution/Dissemination 11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	PO Box 66100		Amount
	City State	Zip Code	155.10
	Chicago IL	60666	Transaction ID : 6e0423e0-5600-4bc1-b Date of Disbursement or Obligation
	Purpose of Expenditure Travel	Category/ Type 004	11 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Mr. Greg Orman	Oppose	President Senate State: KS
	Calendar Year-To-Date Per Election for Office Sought	261541.03	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		> 753.30
			77- 17-
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(a) TOTAL Independent Expenditures		
	(c) TOTAL Independent Expenditures		. •
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent		

[Electronically Filed]

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Date

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party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)			
EMIZED INDEPENDENT EXPENDITURE	S		PAGE 98 OF 320 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)			
Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼
			C C00530766
Check if 24-hour report 48-hour report	New r	report Amends repo	ort filed on
Full Name of Payee Enterprise			Date of Public Distribution/Dissemination
			11 19 2014
Mailing Address 600 Corporate Park Dr			Amount
City	State	Zip Code	3759.80
St Louis	МО	63105	Transaction ID: 89318e7c-dd5c-4a2d-9 Date of Disbursement or Obligation
Purpose of Expenditure Travel		Category/ Type 004	11 19 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Mr. Greg Orman		Oppose	President Senate State: KS
Calendar Year-To-Date Per Election for Office Sought	, , , , ,	261541.03	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
Full Name of Payee			Date of Public Distribution/Dissemination
Enterprise			11 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 600 Corporate Park Dr			Amount
City	State	Zip Code	3615.41
St Louis	МО	63105	Transaction ID: 5f6bbd71-9095-4f4f-b Date of Disbursement or Obligation
Purpose of Expenditure Travel		Category/ Type 004	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Mr. Mark L Pryor		> Oppose	President X Senate State: AR
Calendar Year-To-Date			Disbursement For: Primary General
Per Election for Office Sought	,	292370.62	2014 Other (specify) ► Runoff
(a) CUDTOTAL of Haminad Indonesiant Funcionis			7075.04
(a) SUBTOTAL of Itemized Independent Expenditu	ures		7375.21
(b) SUBTOTAL of Unitemized Independent Expen	ditures		•
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the indepen			not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 99 OF 320 FOR LINE 24 OF FORM 3X
V/	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New re	eport Amends rep	ort filed on
	Full Name of Payee Zachary Vidrine		Date of Public Distribution/Dissemination
	Mailing Address 202 Rue Des Cajun		11 18 2014 Amount
	City State Ville Platte LA	Zip Code 70586	70.00 Transaction ID : de0b5c75-6659-457a-8
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 18 2014
	Name of Federal Candidate Ms. Mary L Landrieu	Support Oppose	Office Sought: House District: 00 President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee Zachary Vidrine Mailing Address 202 Rue Des Cajun		Date of Public Distribution/Dissemination M M M / 18 / Y Y Y Y Y Amount
	City State Ville Platte LA	Zip Code 70586	Transaction ID : bfed14a7-9a28-4668-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 18 / 2014
	Name of Federal Candidate Ms. Mary L Landrieu	Support Oppose	Office Sought: House District: 00 President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 88.90
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		

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	CHEDULE E (FEC Form 3X)					
TΕ	EMIZED INDEPENDENT EXPENDITURES	i		PAGE 100 OF 320 FOR LINE 24 OF FORM 3X		
٧A	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
۷	Vomen Speak Out PAC			C C00530766		
Ch	neck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on		
	Full Name of Payee Krista J Smith			Date of Public Distribution/Dissemination		
	Mailing Address 41176 Bertville Rd			11 19 2014 Amount		
	City Gonzales	State LA	Zip Code 70737	25.00 Transaction ID : 2fc10540-1ba3-4328-a		
	Purpose of Expenditure Salary		Category/ Type 001	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Name of Federal Candidate Ms. Mary L Landrieu		Support Oppose	Office Sought: House District: 00 President X Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:		
	Full Name of Payee Krista J Smith			Date of Public Distribution/Dissemination 11 19 2014		
	Mailing Address 41176 Bertville Rd			Amount		
	City	State	Zip Code	4.74		
	Gonzales	LA	70737	Transaction ID: 089319d2-60ee-402f-b Date of Disbursement or Obligation		
	Purpose of Expenditure Mileage		Category/ Type 002	11 19 7 2014		
	Name of Federal Candidate Ms. Mary L Landrieu		Support	Office Sought: House District: 00		
	Calendar Year-To-Date Per Election for Office Sought	7	Oppose 554635.78	President		
	(a) SUBTOTAL of Itemized Independent Expenditure	es		> 29.74		
	(b) SUBTOTAL of Unitemized Independent Expendi	tures				
	(c) TOTAL Independent Expenditures					
	Under penalty of perjury I certify that the independent	ent expenditures	s reported herein were	not made in cooperation, consultation, or concert		

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

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Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3	X)			
EMIZED INDEPENDENT EXPENI	DITURES			PAGE 101 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Nomen Speak Out PAC			С	
				/ D = D / Y = Y = Y = Y
heck if 24-hour report 48-hour	report New repo	ort Amends repo		
Full Name of Payee Lilly Green				ublic Distribution/Dissemination
			11	19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 205 Medallion Circle			Amount	
City	State	Zip Code		40.00
Shreveport	LA	71119		n ID : 6df38875-9e93-462e-9 isbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M M M	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement Fo 2014	or: Primary General (specify) ► Runoff
Full Name of Payee Lilly Green			Date of P	ublic Distribution/Dissemination
Mailing Address 205 Medallion Circle			Amount	
City	State	Zip Code	-	50.10
Shreveport	LA	71119		on ID: e430e533-4c15-402b-8 hisbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For 2014 Other	or: Primary General (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent	Expenditures			90.10
(4) 00=10111=11111111111111111111111111111				7 7
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		•	7 1 7 1 7
(c) TOTAL Independent Expenditures				
(C) TOTAL IIIdependent Expenditures			· L	7 7 7
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party committee.	any candidate or authorized			

[Electronically Filed]

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Date

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Signature

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	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 102 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	rt Amends report	filed on
	Full Name of Payee Laura U Logie		Date of Public Distribution/Dissemination
	Mailing Address 2565 Shire Circle		11
	City State 2	Zip Code	20.00
	Harrisonburg VA	22801	Transaction ID : bdada3ea-3990-4889-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014
	Full Name of Payee Carla K Pilgreen		Date of Public Distribution/Dissemination
	Mailing Address 212 Stonecliff Dr		Amount
	City State	Zip Code	35.00
	West Monro LA	71291	Transaction ID: 729b1b0a-bf63-4205-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		55.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

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Date

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Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDIT	JRES			E 103 OF 320 LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				
Vomen Speak Out PAC				FICATION NUMBER ▼
			C C0053	;0766
neck if 24-hour report 48-hour report	ort New rep	oort Amends repo	rt filed on	D / Y = Y = Y
Full Name of Payee Carla K Pilgreen				ribution/Dissemination
				19 / 2014
Mailing Address 212 Stonecliff Dr			Amount	
City	State	Zip Code		6.90
West Monro	LA	71291	Transaction ID: 498 Date of Disbursement	
Purpose of Expenditure Mileage		Category/ Type 002	M M / D	19 / 2014
Name of Federal Candidate		Support	Office Sought: Ho	use District: 00
Ms. Mary L Landrieu		Oppose		nate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: 2014 Other (specify)	Primary General Runoff
Full Name of Payee				ribution/Dissemination
Bobbie M Steinsholt				10 / Y Y Y Y Y
Mailing Address 3009 Skelly St			Amount	19 2014
City	State	Zip Code		10.00
Shreveport	LA	71107	Transaction ID : ab7 Date of Disburseme	7d65ae-b8cf-4017-8
Purpose of Expenditure Salary		Category/ Type 001	M = M / D	19 / 2014
Name of Federal Candidate		Support	Office Sought: Ho	ouse District: 00
Ms. Mary L Landrieu		Support Oppose		nate State: LA
Calendar Year-To-Date			Disbursement For:	Primary General
Per Election for Office Sought		554635.78	2014 Other (specify)	▶ Runoff
(a) SUBTOTAL of Itemized Independent Exp	enditures		· • · · · · · · · · · · · · · · · · · ·	16.90
(b) SUBTOTAL of Unitemized Independent E	xpenditures		•	7
(c) TOTAL Independent Expenditures				
(V) TOTAL Independent Expenditures			•	4
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any				onsultation, or concert

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PAGE 104 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
= M / D = D / Y = Y = Y
of Public Distribution/Dissemination
11 19 2014
nt
40.00 ction ID: b383f66c-b0d7-4483-8 of Disbursement or Obligation
11 19 2014
t: House District: 00
ent X Senate State: LA
t For: Primary General
ther (specify) ▶Runoff
of Public Distribution/Dissemination
11 19 / 2014
nt
7.50 ction ID : 0edf8571-c04c-496f-a of Disbursement or Obligation
7.50 ction ID : 0edf8571-c04c-496f-a
7.50 ction ID : 0edf8571-c04c-496f-a of Disbursement or Obligation
7.50 Iction ID: 0edf8571-c04c-496f-a of Disbursement or Obligation 11
7.50 Iction ID : 0edf8571-c04c-496f-a of Disbursement or Obligation 11
7.50 Inction ID : 0edf8571-c04c-496f-a of Disbursement or Obligation 11
7.50 Iction ID : 0edf8571-c04c-496f-a of Disbursement or Obligation 11

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Women Speak Out PAC				C C00530766	
Check if 24-hour report 48	-hour report New repo	ort Amends repo	rt filed	on M M / D D / Y Y Y Y	
Full Name of Payee				Date of Public Distribution/Dissemination	
Jenny N Brown				11 19 2014	
Mailing Address 1270 Lovelady R	d			Amount	
City	State	Zip Code		40.00	
West Monroe	LA	71292	1	Fransaction ID : b383f66c-b0d7-4483-8 Date of Disbursement or Obligation	
Purpose of Expenditure Salary		Category/ Type 001		11 19 / 2014 2014	
Name of Federal Candidate		Support	Office	Sought: House District:00	
Ms. Mary L Landrieu		X Oppose		President Senate State: LA	
Calendar Year-To-Date Per Election for Office Sough		554635.78	Disbur 2014	rsement For:	
Full Name of Payee				Date of Public Distribution/Dissemination	
Jenny N Brown				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1270 Lovelady R	d			Amount	
City	State	Zip Code		7.50	
West Monroe	LA	71292	-	Transaction ID: 0edf8571-c04c-496f-a Date of Disbursement or Obligation	
Purpose of Expenditure Mileage		Category/ Type 002		M M / 19 / 2014	
Name of Federal Candidate		Support	Office	Sought: House District:00	
Ms. Mary L Landrieu		Oppose		President Senate State: LA	
Calendar Year-To-Date Per Election for Office Sough		554635.78	Disbui 2014	rsement For: Primary General Other (specify) Runoff	
(a) CURTOTAL of Itamizad Indone	adant Euranditura				
(a) SUBTOTAL of Itemized Indepen	ident Expenditures		. ▶	47.50	
(b) SUBTOTAL of Unitemized Inde	pendent Expenditures		•		
(c) TOTAL Independent Expenditur	es		•		
	n of, any candidate or authorized			de in cooperation, consultation, or concert or (if the reporting entity is not a political	
Ms. Emily Buchanan	[Electroni	ically Filed] Date	M 05	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		_ Date			

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		<u> </u>
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 105 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New repo	rt Amends repor	t filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Maegan E McDaniel		Date of Public Distribution/Dissemination
	Mailing Address 3009 Skelly St		11 19 2014
	, , ,		Amount
	City State	Zip Code	10.00
	Shreveport LA	71107	Transaction ID: ebd190dc-e962-4698-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Maegan E McDaniel		11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 3009 Skelly St		Amount
	City State	Zip Code	3.90
	Shreveport LA	71107	Transaction ID : 3cdc6158-9566-4569-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		13.90
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITU	RES		PAGE 106 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour repor	rt New re	eport Amends repo	ort filed on
Full Name of Payee Susan K Hamby			Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 202 Violet St			Amount
City	State	Zip Code	20.00
West Monroe	LA	71292	Transaction ID : dd54fe30-5945-46c6-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
Full Name of Payee Susan K Hamby			Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 202 Violet St			Amount
City	State	Zip Code	0.45
West Monroe	LA	71292	Transaction ID : 9fbcea36-8908-4f1f-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 19 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
(a) SUBTOTAL of Itemized Independent Expe	enditures		> 20.45
(b) SUBTOTAL of Unitemized Independent Ex	kpenditures		
(c) TOTAL Independent Expenditures			· • · · · · · · · · · · · · · · · · · ·
	candidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

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	age# 1331333210		
	CHEDULE E (FEC Form 3X)		
ΓΕ	MIZED INDEPENDENT EXPENDITURES		PAGE 107 OF 320
			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
	Full Name of Payee Jeanne Tribou		Date of Public Distribution/Dissemination
	Mailing Address 22369 Ponderosa Dr.		11 19 2014 Amount
	City State	Zip Code	40.00
	Mandeville LA	70471	Transaction ID: b2b57eb9-962f-400d-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Jeanne Tribou		Date of Public Distribution/Dissemination
	Mailing Address 22369 Ponderosa Dr.		Amount
	City State	Zip Code	5.70
	Mandeville LA	70471	Transaction ID : 123d9114-d263-446e-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 45.70
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	I leden manalis of mariner I contifusion that the findence death amount to	reported barein	not made in economic consultation as account

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	18	2015
Signature					

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 108 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed on
	Full Name of Payee Amanda Boley		Date of Public Distribution/Dissemination
	Mailing Address		11 / 19 / 2014
	Split Oak Drive		Amount
	City State charlotte NC	Zip Code	81.50
		28227	Transaction ID: 98afe913-8017-4ba1-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
	Full Name of Payee Amanda Boley		Date of Public Distribution/Dissemination
	Mailing Address Split Oak Drive		11 / 19 / 2014
	Cpill Oak Brive		Amount
	City State	Zip Code	23.61
	charlotte NC	28227	Transaction ID : 1fb7e4ab-76f9-4156-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 105.11
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		· •
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

05

Date

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Signature

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	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 109 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New repo	ort Amends repor	t filed on
	Full Name of Payee Gregory Green		Date of Public Distribution/Dissemination
	Mailing Address 2506 Bolch Street		11 19 2014 Amount
	City State	Zip Code	40.00
	Shreveport LA	71104	Transaction ID: e84da8b8-8e90-4054-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Gregory Green		Date of Public Distribution/Dissemination
	Mailing Address 2506 Bolch Street		Amount
	City State	Zip Code	17.10
	Shreveport LA	71104	Transaction ID: 18789041-d721-439e-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		57.10
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

18

2015

PAGE	110	OF	320
FOR L	INE 24	OF F	FORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee Sheri J Peace	Date of Public Distribution/Dissemination
Mailing Addrocs	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
9685 Paula St	Amount
City State Zip Code	95.00
	Transaction ID: 0f36fd53-84ea-4f34-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 19 / 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	rsement For: Primary General ☐ Other (specify) ► Runoff
Full Name of Pause	Ctrici (specify) F
Sheri J Peace	Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 9685 Paula St	11 19 2014 Amount
City State Zip Code	16.80
Keithville LA 71047	Transaction ID: 270cf308-d310-4b16-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	M 1M / D D / Y Y Y Y Y 19 19 19 19 19 19 19 19 19 19 19 19 19
Name of Federal Candidate Support Office	Sought: House District: 00
Mo Monul Landricu	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rrsement For: Primary General Nother (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	111.80
(b) SUBTOTAL of Unitemized Independent Expenditures	42 42 42
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	5 18 2015
Signature	

	PAGE 111 OF 320 FOR LINE 24 OF FORM 3X
EC IE	ENTIFICATION NUMBER ▼
	C00530766
M /	D D / Y Y Y Y
Public	Distribution/Dissemination
M /	19 / 2014
- (25)	35.00
	: b007ffe1-6fd9-41b2-9 irsement or Obligation
M /	19 / 2014
	House District: 00

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour repor	New repo	ort Amends repo	ort filed on	
Full Name of Payee			D	Date of Public Distribution/Dissemination
Beau Autin				11
Mailing Address 345 Auroura Ave			А	Amount
City	State	Zip Code	— Г	35.00
Metairie	LA	70006		ansaction ID : b007ffe1-6fd9-41b2-9
Purpose of Expenditure Salary		Category/ 001		Date of Disbursement or Obligation 11 19 2014
Name of Federal Candidate		Туре		
		Support	Office S	
Ms. Mary L Landrieu		X Oppose	Pr	resident Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburse 2014	ement For: Primary General
	7 7			X Other (specify) ► Runoff
Full Name of Payee				Date of Public Distribution/Dissemination
Beau Autin				11 19 2014
Mailing Address 345 Auroura Ave			Δ	Amount
City	State	Zip Code		1.11
Metairie	LA	70006		ransaction ID : 40c361d0-4d19-4ab3-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ 002		11 19 2014
		Type 002		
Name of Federal Candidate		Support	Office S	Sought: House District:00
Ms. Mary L Landrieu		Oppose	Pı	resident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ement For: Primary General
, ,	, , , , , ,			X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Exper	nditures		. [36.11
(b) SUBTOTAL of Unitemized Independent Ex	penditures		. •	7- 7- 7- 7-
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorized			
Ms. Emily Buchanan	[Electron	ically Filed]	M M M	18 2015
Signature	,22.00.000	Date	03	10 2010

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CHEDULE E (FEC Form 3	•			_		
EMIZED INDEPENDENT EXPENI	DITURES				AGE 112	OF 320
				Į FO	OR LINE ≥	4 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC IDEN	NTIFICATIO	ON NUMBER ▼
Nomen Speak Out PAC				C co	0530766	
				M = M /	D D /	Y Y Y
heck if 24-hour report 48-hour	report New report	ort Amends repo	rt filed o			
Full Name of Payee				Date of Public D	oistribution/	Dissemination
Alice K Salazar				11 /	19	2014
Mailing Address 605 W Houston St			,	Amount		
City	State	Zip Code				80.00
Marshall	State	75633	Tı	ansaction ID :	-E0f/1275-6	
		/5033		Date of Disburse		
Purpose of Expenditure Salary		Category/ Type 001		11 /	19	2014
Name of Federal Candidate		Support	Office S	`arrahti	House I	District: 00
Ms. Mary L Landrieu		Support Oppose			Senate	State: LA
Calendar Year-To-Date			Disburs	ement For:	Primary	General
Per Election for Office Sought		554635.78	2014	Other (spec		Runoff
Full Name of Payee				Date of Public D	Distribution/	Dissemination
Alice K Salazar				Date of Public D	Distribution/	Dissemination 2014
				M - M /	D D /	Y Y Y Y Y
Alice K Salazar Mailing Address 605 W Houston St	000			11 /	D D /	2014
Alice K Salazar Mailing Address 605 W Houston St City	State	Zip Code		Amount	19 /	y 2014 50.40
Alice K Salazar Mailing Address 605 W Houston St City Marshall	State TX	Zip Code 75633		11 /	19 / 19 / 562be618-	2014 50.40 689d-4235-8
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure		75633 Category/ 002		Amount ransaction ID : Date of Disburse	19 / 19 / 19 / 19 / 19 / 19 / 19 / 19 /	50.40 689d-4235-8 Obligation
Alice K Salazar Mailing Address 605 W Houston St City Marshall		75633		Amount Amount Date of Disburse	19 / 19 / 562be618-ement or C	50.40 689d-4235-8 Obligation
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure		75633 Category/ 002		Amount Amount Date of Disburse	562be618- ement or C	50.40 689d-4235-8 Obligation
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage		75633 Category/ Type 002	Office S	Amount ransaction ID: Date of Disburse 11 Sought:	562be618- ement or C	50.40 689d-4235-8 Obligation
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date		75633 Category/ 002 Support Oppose	Office \$	Amount Transaction ID: Date of Disburse 11 Sought:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu		75633 Category/ Type 002 Support	Office S	Amount ransaction ID: Date of Disburse 11 Sought: President	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date		75633 Category/ 002 Support Oppose	Office \$	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA General
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date	TX	75633 Category/ 002 Support Oppose 554635.78	Office S Disburs 2014	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 obligation 2014 District: 00 State: LA General
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent	TX Expenditures	75633 Category/ 002 Support Oppose 554635.78	Office S Disburs 2014	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA General Runoff
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought	TX Expenditures	75633 Category/ 002 Support Oppose 554635.78	Office S Disburs 2014	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA General Runoff
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent	Expenditures	75633 Category/ 002 Support Oppose 554635.78	Office S Disburs 2014	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA General Runoff
Alice K Salazar Mailing Address 605 W Houston St City Marshall Purpose of Expenditure Mileage Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent (b) SUBTOTAL of Unitemized Independent	Expenditures	75633 Category/ 002 Support Oppose 554635.78	Office S Disburs 2014	Amount Amount Tansaction ID: Date of Disburse M 11 Sought: President Element For:	562be618-ement or C	50.40 689d-4235-8 Obligation 2014 District: 00 State: LA General Runoff

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	18	2015
Signature					

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nage# 15951393222						
CHEDULE E (FEC Form 3						
TEMIZED INDEPENDENT EXPEN	DITURES		PAGE 113 OF 320 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)			I			
Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼			
Women opeak out 1710			C C00530766			
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on			
Full Name of Payee			Date of Public Distribution/Dissemination			
Julia Perry			11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2046 Perrin St Apt C			Amount			
City	State	Zip Code	80.00			
Shreveport	LA	71101	Transaction ID : b9b51457-7230-46b3-8			
Purpose of Expenditure			Date of Disbursement or Obligation			
Salary		Category/ Type 001	11 19 2014			
Name of Federal Candidate		Support	Office Sought: House District:00			
Ms. Mary L Landrieu		X Oppose	President X Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014			
rei Liection for Office Sought	, , , , ,		Other (specify) ► Runoff			
Full Name of Payee			Date of Public Distribution/Dissemination			
Julia Perry			11 19 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2046 Perrin St Apt C			Amount			
City	State	Zip Code	7.50			
Shreveport	LA	71101	Transaction ID: a8885d64-6917-455d-9 Date of Disbursement or Obligation			
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y			
Mileage		Type 002	11 19 2014			
Name of Federal Candidate		Support	Office Sought: House District: 00			
Ms. Mary L Landrieu		Oppose	President X Senate State: LA			
Calendar Year-To-Date		554635.78	Disbursement For: Primary General			
Per Election for Office Sought	<u> </u>	00 1000.70	Other (specify) Runoff			
(a) SUBTOTAL of Itemized Independent	Expenditures		87.50			
(b) CURTOTAL of United Standards	ant Eva and it is a					
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		•			
(c) TOTAL Independent Expenditures						
			72 1 72 1			

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						

PAGE	114	OF	320
FOR L	INE 24	OF F	320 ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report	New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee Jessica R Resendiz		Date of Public Distribution/Dissemination
Mailing Address		11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
9685 Paula St		Amount
City Sta	te Zip Code	100.00
Keithville LA	71047	Transaction ID : c38de1d4-a481-44c5-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
Name of Federal Candidate	Support Offic	e Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disb 2014	ursement For: Primary General Nother (specify) ► Runoff
Full Name of Payee Jessica R Resendiz		Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 9685 Paula St		Amount
City	te Zip Code	26.10
Keithville L/	A 71047	Transaction ID : aa138cf9-bce1-4de9-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offic	e Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose □	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disb 2014	ursement For: Primary General Water (Specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	126.10
(b) SUBTOTAL of Unitemized Independent Expenditures.	•	
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent ex with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized committee or agent of either	
Ms. Emily Buchanan	[Electronically Filed] Date	05 18 2015
Signature		

PAGE	115	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Ana L Esquivel	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 284 Cr 1401	Amount
City State Zip Code	60.00
Carthage TX 75633	Transaction ID: d1439af9-3af3-42f9-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 19 / 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary General Char (specify) ▶ Runoff
	X Other (specify) ► Runoff
Full Name of Payee Hilary Townsend	Date of Public Distribution/Dissemination
Mailing Address 4506 US Hwy 79 North	11 19 2014 Amount
City State Zip Code	60.00
Deberry TX 75639	Transaction ID: 9d9b85e3-ce40-4a54-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary General X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	120.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date)5 18 2015
Signature	

PAGE				320
FOR L	INE	24 OF	FOI	RM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee Heather Ainsworth		Date of Public Distribution/Dissemination
Mailing Address 9685 Paula St		11 19 2014 Amount
O'the	7'- O- I-	440.00
City State Keithville LA	Zip Code 71047	Transaction ID : 394d6fd7-c309-4558-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	ice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 20°	sbursement For: Primary General 14
Full Name of Payee Heather Ainsworth		Date of Public Distribution/Dissemination
Mailing Address 9685 Paula St		Amount
City State	Zip Code	49.80
Keithville LA	71047	Transaction ID: 618762ab-442f-4288-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 19 / 2014
Name of Federal Candidate	Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 14 Runoff Check Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	>	159.80
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
		7 7
(c) TOTAL Independent Expenditures	·····	7 7
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015
Signature		

FOR LINE 24 OF FORM 3X
TOTT LINE 24 OF TOTAL 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed of	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Taylor De Julian-Hernandez	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 284 Cr 1401	Amount
City State Zip Code	60.00
	Fransaction ID: 73ed2f8f-747f-40be-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M M / D D / Y Y Y Y Y 19 19 2014
Name of Federal Candidate Support Office	Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA State:
Calendar Year-To-Date Per Election for Office Sought Disburs 2014	sement For:
Full Name of Payee Taylor De Julian-Hernandez Mailing Address 284 Cr 1401	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	43.80
	Transaction ID: 878cf3ab-883f-4c63-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 19 / 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	103.80
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

PAGE 118 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
of Public Distribution/Dissemination
11 19 2014
int
20.00
oction ID : 1b5e6121-4878-40ec-a of Disbursement or Obligation
11 19 / Y Y Y Y Y 1
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) ▶Runoff
of Public Distribution/Dissemination
11 19 / 2014
ınt
1.20
action ID: ec41b26f-f85a-4864-a of Disbursement or Obligation
11 19 2014
nt: House District:00
ent Senate State: LA
nt For: Primary General
Other (specify) Runoff
21.20
21.20
21.20

NAME OF COMMITTEE (In Full) Women Speak Out PAC Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Lesley Lennox Mailing Address 2305 Cleary Ave Amou City State Zip Code LA Metairie 70001 Transa Date Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Preside Disbursemen Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Lesley Lennox Mailing Address 2305 Cleary Ave Amou City Zip Code State Metairie LA 70001 Transa Date Purpose of Expenditure Category/ 002 Mileage Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

MIZED INDEPENDENT EXPENDITU	IRES		PAGE 119 OF 320 FOR LINE 24 OF FORM 3
IE OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC			C C00530766
ck if 24-hour report 48-hour repo	rt New	report Amends repo	ort filed on
Full Name of Payee Gary W Fuhrmann			Date of Public Distribution/Dissemination
Gary W Funimanin			11 19 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9425 Jessica Drive			Amount
City	State	Zip Code	47.50
Shreveport	LA	71106	Transaction ID: d5c66a2f-f1c2-45ec-9
Purpose of Expenditure Salary		Category/ Type 001	Date of Disbursement or Obligation 11 19 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
Full Name of Payee Gary W Fuhrmann Mailing Address 9425 Jessica Drive			Date of Public Distribution/Dissemination 11 19 2014 Amount
0:4.	Ctata	Zin Codo	9.60
City Shreveport	State LA	Zip Code 71106	Transaction ID : b972a626-18f1-41b6-a
Purpose of Expenditure Mileage		Category/ Type 002	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
) SUBTOTAL of Itemized Independent Expe	enditures		
a) SURTOTAL of Unitamized Independent E	rpenditures		- >
) SOBTOTAL OF OTHER HIZER INDEPENDENT L.			

Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

TEMIZE	ED INDEPENDENT EXPENDI	ÍTURES				AGE 120 OR LINE 24	OF 320 4 OF FORM 3X
	OF COMMITTEE (In Full)				FEC IDEN	NTIFICATIO	N NUMBER ▼
Wome	en Speak Out PAC				C coo	0530766	
Check if	24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed on	M = M /	D = D /	YIYIY
	Name of Payee ura U Logie			Date	te of Public D		
					11 /	19	2014
Maıııı	ing Address 2565 Shire Circle			Amo	nount		
City		State	Zip Code				35.00
	isonburg	VA	22801		saction ID : et te of Disburse		
Purpo Sala	pose of Expenditure ary		Category/ Type 001		11 /	19	2014
Nam	ne of Federal Candidate		Support	Office Sou	ught:	House D	District: 00
Ms. I	Mary L Landrieu		Oppose			Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	nent For:	Primary	General Runoff
	Name of Payee onavon Fusilier				te of Public D		Dissemination 2014
Maili	ing Address 155 Chauffpied Elmer Ro	d Lot 19		Am	nount		
City		State	Zip Code				25.00
	rksville	LA	71351		nsaction ID : o		5d25-4a1d-a
Purp Sala	pose of Expenditure ary		Category/ Type 001		11 /	19	2014
Nam	ne of Federal Candidate		Support	Office Sou	ught:	House [District:00
Ms.	Mary L Landrieu		Oppose	Pres	sident X	Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	nent For:	Primary	General Runoff
(a) SI	UBTOTAL of Itemized Independent E	Expenditures					60.00
(b) SI	UBTOTAL of Unitemized Independent	it Expenditures					
• -		•		_			
(c) T(OTAL Independent Expenditures			•		-7-	
with, c	r penalty of perjury I certify that the or at the request or suggestion of, ar committee) any political party commit	ny candidate or authorized					
	Ms. Emily Buchanan	[Electron	ically Filed]	M M M	/ 18 /	2015	
Siç	gnature		Date	, 05	10	2010	

SC ITE

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITU	RES		PAGE 121 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour report	t New re	port Amends repo	ort filed on
Full Name of Payee Donavon Fusilier			Date of Public Distribution/Dissemination
Mailing Address 155 Chauffpied Elmer Rd Lot	FAGE 121 OF 320 FOR LINE 24 OF FORM 3X FORMITTEE (In Full) FOR Speak Out PAC 24-hour report		
City	State	Zin Code	8.43
Marksville		·	Transaction ID: e10ad50a-534c-4dc5-8
Purpose of Expenditure Mileage			
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu			President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014
Full Name of Payee Christopher L Gilbert			M = M / D = D / Y = Y = Y
Mailing Address 55 Lovell Johnson Rd			Amount
City	State	Zip Code	80.00
Picayune	MS	·	
Purpose of Expenditure Salary			
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu			President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014
(a) SUBTOTAL of Itemized Independent Exper	nditures		. ▶ 88.43
(b) SUBTOTAL of Unitemized Independent Ex	penditures		. •
(c) TOTAL Independent Expenditures			·
	andidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)			
T	EMIZED INDEPENDENT EXPENDITURES			PAGE 122 OF 320 FOR LINE 24 OF FORM 3X
NI /	AME OF COMMITTEE (In Full)			
	Vomen Speak Out PAC			FEC IDENTIFICATION NUMBER ▼
_				C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed	on M = M / D = D / Y = Y = Y = Y
	Full Name of Payee			Date of Public Distribution/Dissemination
	Christopher L Gilbert			11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 55 Lovell Johnson Rd			Amount
	City State	Zip Code		44.40
	Picayune MS	39466	-	Transaction ID : e0935820-8366-4d6c-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ 002		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
	Willouge	Type 002		11 19 2014
	Name of Federal Candidate	Support	Office	Sought: House District: 00
	Ms. Mary L Landrieu	Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbur 2014	rrsement For:
	Full Name of Payee			Date of Public Distribution/Dissemination
	Felicia A Jones			M M / D D / Y Y Y Y 1 1 1 1 1 1 9 2014
	Mailing Address 4106 Martha St			Amount
	City State	Zip Code		80.00
	Shreveport LA	71109		Transaction ID : f122f11c-b704-475c-b
	Purpose of Expenditure			Date of Disbursement or Obligation
	Salary	Category/ Type 001		11 19 2014
	Name of Federal Candidate	Support	Office	e Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose		President Senate State: LA
	Calendar Year-To-Date	'ariani ari		ursement For: Primary General
	Per Election for Office Sought	554635.78	2014	Other (specify) ► Runoff
			·	
	(a) SUBTOTAL of Itemized Independent Expenditures		▶	124.40
	(b) SUBTOTAL of Unitemized Independent Expenditures		··· •	
	(c) TOTAL Independent Expenditures		··· •	7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.			

[Electronically Filed]

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Date

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Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDIT

MIZED INDEPENDENT EXPENDIT	JRES			PAGE 123 FOR LINE 24	OF 320 OF FORM 3X
E OF COMMITTEE (In Full)				FEC IDENTIFICATION	NUMBER ▼
omen Speak Out PAC				C C00530766	
k if 24-hour report 48-hour report	ort New re	eport Amends repo	rt filed on	M = M / D = D /	Y
Full Name of Payee			D	ate of Public Distribution/Di	ssemination
Felicia A Jones				M M / D D / 19	2014
Mailing Address 4106 Martha St			A	mount	
Dity	State	Zip Code	<u> —</u> Г		11.10
Shreveport	LA	71109		ansaction ID : ac257667-c0	ae-4b86-9
Purpose of Expenditure Mileage		Category/ Type 002		ate of Disbursement or Ob	2014
Name of Federal Candidate		Support	Office So	ought: House Di	strict: 00
Ms. Mary L Landrieu		X Oppose			State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ment For: Primary Other (specify) ▶	General Runoff
Full Name of Payee Tammay Williams				Pate of Public Distribution/D	Y Y Y Y
Mailing Address 924 N. Prieur St			A	11 19 mount	2014
City	State	Zip Code	— [80.00
New Orleans	LA	70116		ansaction ID : ba4be977-10 Date of Disbursement or Ob	
Purpose of Expenditure Salary		Category/ Type 001		11 / 19	2014
Name of Federal Candidate		Support	Office S	ought: House D	istrict: 00
Ms. Mary L Landrieu		Oppose			State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ement For: Primary Other (specify) ▶	General Runoff
CURTOTAL of Itemized Independent Fun	anditure o			<u> </u>	04.40
a) SUBTOTAL of Itemized Independent Exp	enaitures				91.10

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES		200 404 05 200
IEMIZED INDEPENDENT EXPENDITURES		PAGE 124 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends report	t filed on WMM / DDD / YYYYY
Full Name of Payee Tammay Williams		Date of Public Distribution/Dissemination
Mailing Address 924 N. Prieur St		11 19 2014 Amount
Cit.: State	7in Codo	15.00
City State New Orleans LA	Zip Code 70116	Transaction ID: 838f5939-0487-43ba-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 19 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For:
Full Name of Payee Antoinette Franklin		Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 8822 Apple St		Amount
City State	Zip Code	60.00
New Orleans LA	70188	Transaction ID : bd0b2b5f-4866-496c-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		75.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed]	05 18 2015

2015

Date

S

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)						
TE	EMIZED INDEPENDENT EXPENDITURES				PAGE 125		320 3M 3Y
NΔ	AME OF COMMITTEE (In Full)						
	Vomen Speak Out PAC				IDENTIFICATI	ON NUMB	ER ▼
				C	C00530766		
Ch	neck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on	M = M		Y = Y = Y	Y
	Full Name of Payee		D	ate of Pub	olic Distribution	/Dissemina	tion
	Antoinette Franklin			11	19	2014	
	Mailing Address 8822 Apple St		A	mount			
	City State	Zip Code	<u> —</u> Г	-		12.	00
	New Orleans LA	70188			ID: e854d49f- bursement or (1bac-42bf-	
	Purpose of Expenditure Mileage	Category/ 002		M M M	/ 0 0 /	2014	
	Mileage	Type 002			19	2014	
	Name of Federal Candidate	Support	Office So	ought:	House	District:	00
	Ms. Mary L Landrieu	Oppose	Pre	esident	X Senate	State:	LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ment For:		/ Ge	eneral
	Full Name of Payee		<u> </u>		olic Distribution	/Dissemina	ition
	Cynthia N Schmit			м = м 11	/ 19 /	2014	
	Mailing Address 2226 Taft Circle Apt 1		A	mount			
	City State	Zip Code	—— [30.	00
	Winchester VA	22601			ID: c7b4691a		5-9
	Purpose of Expenditure Salary	Category/ Type 001		M M M	/ 19 /	201	
	Name of Federal Candidate		055			D:	00
	Ms. Mary L Landrieu	Support	Office So	ought:	House	District:	LA
	The many 2 canana	Oppose		esident	Senate	State:	
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014 _	ement For:			eneral
	Tel Election for Since Sought	, , , , , , , , , , , , , , , , , , , ,	>	Other (specify) -	Runoff	
							-
	(a) SUBTOTAL of Itemized Independent Expenditures		▶			42.00)
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •		7-1-7-		
	(a) TOTAL Independent Expenditures		г				-
	(c) TOTAL Independent Expenditures		" ▶		7		
	Under penalty of perjury I certify that the independent expenditure						
	with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.	zea committee or agent o	of either, o	(If the re	eporting entity	s not a po	iitical

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Date

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PAGE 126 OF 320 FOR LINE 24 OF FORM 3X
C C00530766
M / D = D / Y = Y = Y
Public Distribution/Dissemination
1 19 / 2014
30.00
on ID : 6c8f7265-1930-4a4c-8 Disbursement or Obligation
1 19 2014
House District: 00
Senate State: LA
For: Primary General
er (specify) ▶Runoff
Public Distribution/Dissemination

C C00530766	NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Tall Name of Payee Zachary Vidrine Mailing Address 202 Rue Des Cajun City State LA 70586 Furpose of Expenditure Salary Name of Federal Candidate Mailing Address 202 Rue Des Cajun Name of Federal Candidate Mailing Address 202 Rue Des Cajun Name of Federal Candidate Mailing Address 202 Rue Des Cajun State Category/ Type Ont Tipe Tipe Ont Tipe Ont Tipe Ti	Women Speak Out PAC				C C00530766
Mailing Address 202 Rue Des Cajun Amount	Check if 24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Mailing Address 202 Rue Des Cajun City					Date of Public Distribution/Dissemination
City State LA 70586 Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Mailing Address 202 Rue Des Cajun City State Ville Platte LA 70586 Transaction ID: 6e87285-1930-4a4c-8 Date of Disbursement or Obligation Support Office Sought: House District: 00 President: Senate State: LA Disbursement For: Primary General 2014 Other (specify) Image: President Senate State: LA Disbursement For: Primary General 2014 Amount City State Zip Code Ville Platte LA 70586 Transaction ID: 6e87285-1930-4a4c-8 Date of Disbursement For: Primary General 2014 Amount City State Zip Code Type 002 Types of Expenditure Mileage Category/ Mileage Category/ Mileage Category/ Dopose President: Senate State: LA Transaction ID: 6a30d74s-e00e-4ecc-b Date of Disbursement For: Primary General 2014 Amount City State Zip Code Type 002 Type 002 Type 002 Type 002 Type 002 Type 002 Type 001 Transaction ID: 6a30d74s-e00e-4ecc-b Date of Disbursement For: Primary General 2014 Amount City State Support Office Sought: House District: 00 Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Calendar Year-To-Date Per Election for Office Sought Arransaction ID: 6a30d74s-e00e-4ecc-b Date of Disbursement For: Primary General 2014 Colleger Sought: Senate State: LA Disbursement For: Primary General 2014 Colleger Sought: Arransaction ID: 6a870d74s-e00e-4ecc-b Date of Public Distribution/Dissemination Transaction ID: 6a870d74s-e00e-4ecc-b Date of Public Distribution/Dissemination Transaction ID: 6a870d74s-e00e-4ecc-b Date of Public Distribution/Dissemination The Per Colleger Sought Senate State: LA Calendar Year-To-Date Per Election for Office Sought Transaction ID: 6a870d74s-e00e-4ecc-b Date of Public Distribution/Dissemination The Per Colleger Senate State: LA Transaction ID: 6a870d74s-e00e-4ecc-b Date of Public Distribution/Dissemination The Per Colleger Senate State					
Ville Platte LA 70586 Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Category/ Type Oot Type	Mailing Address 202 Rue Des Cajun				Amount
Ville Platte LA 70586 Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Category/ Type Oot Type	City	State	Zip Code		30.00
Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought City Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Oppose Date of Public Distribution/Dissemination City Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Office Sought: House District: On Runoff Transaction ID: 5a30d74a-e00e-4ccd-b Date of Disbursement or Obligation Transaction ID: 5a30d74a-e00e-4ccd-b Date of Disbursement For: Date of Disbursement For: Date of Disbursement For:	1 '		•		
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Zachary Vidrine Mailing Address 202 Rue Des Cajun City State LA 70586 Transaction D: 5330d74a-e00e-4cod-b Date of Public Distribution/Dissemination In 1 1 1 19 2014 Amount City State Zip Code Ville Platte LA 70586 Transaction D: 5330d74a-e00e-4cod-b Date of Disbursement or Obligation Wille Platte Name of Federal Candidate Mileage Category/ Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Amount Amount Transaction D: 5330d74a-e00e-4cod-b Date of Disbursement or Obligation Ville Platte Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Wille Substrate State: LA Other (specify) ▶ Runoff Wille Substrate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Wille Substrate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Wille Substrate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Wille Substrate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Wille Substrate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff					M = M / D = D / Y = Y = Y
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Runoff Date of Public Distribution/Dissemination Amount City State Zip Code Ville Platte LA 70586 Purpose of Expenditure Mileage Name of Federal Candidate Mileage Name of Federal Candidate Mileage Name of Federal Candidate Support Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Senate State: LA Office Sought: House District: 00 Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Other (specify) ▶ Runoff Mileage Category/ Type Occupance Office Sought: House District: 00 Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff Other (specify) ▶ Runoff (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emilly Buchanan [Electronically Filed] Date Office Sught	Name of Federal Candidate		Support	Office	Sought: House District: 00
Per Election for Office Sought Full Name of Payee Zachary Vidrine Mailing Address 202 Rue Des Cajun City State LA 70586 Purpose of Expenditure Mileage Category/ Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Enilly Buchanan Electronically Filed Date of Public Distribution/Dissemination 11	Ms. Mary L Landrieu				
Full Name of Payee Zachary Vidrine Mailing Address 202 Rue Des Cajun City Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Mileage Category/ Mis. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] Date Date of Public Distribution/Dissemination Amount Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation Transaction ID : 5a30d74a-e00e-4cod-b Date of Disbursement or Obligation			554635.78		
Amount City State Zip Code Transaction ID: 5a30d74a-e00e-4ccd-b Date of Disbursement or Obligation	Per Election for Office Sought		001000.10		X Other (specify) ▶ Runoff
Mailing Address 202 Rue Des Cajun City State Zip Code Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Type 002 Tansaction ID: 5a30dr/aa-e00e-4ccd-b Date of Disbursement or Obligation Mary L Landrieu Support Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Total Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Total T					Date of Public Distribution/Dissemination
City State Zip Code Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Type O02 Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Amount 17.10 Transaction ID: 5a30d74a-e00e-4ccd-b Date of Disbursement or Obligation Transaction ID: 5a30d74a-e00e-4ccd-b Transaction ID: 5a30d74a-e00e-4ccd					
Ville Platte LA 70586 Purpose of Expenditure Mileage Category/ Type O02 Name of Federal Candidate Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Transaction ID: 5a30d74a=e00e-4ccd-b Date of Disbursement or Obligation Transaction ID: 5a30d74a=e0e-4ccd-b Date of Disbursement or Obligation Transaction ID: 2014 Transaction I	Mailing Address 202 Rue Des Cajun				Amount
Ville Platte LA 70586 Transaction ID: 5a30d74a-e00e-4ccd-b Date of Disbursement or Obligation Purpose of Expenditure Mileage Category/ Type 002 Mathematical Platte Category/ Type 003 Mathematical Platte Category/ Type 004 Mathematical Platte Support Office Sought: House District: 00 Mathematical Primary General 2014 Other (specify) ▶ Runoff 47.10 Category/ Type 005 Name of Federal Candidate Support Name of Federal Candidate Support Support Office Sought: House District: 00 Category/ Type 005 Name of Federal Candidate Name of Federal Candidate Support Office Sought: House District: 00 Category/ Type Other (specify) ▶ Runoff A7.10 Category/ Type Other (specify) ▶ A7.10 Category Type Other (specify) ▶ A7.10 Category Type Other (specify) ▶ A7.10 Category Type Type Type Type Type Type Type Typ	City	State	Zip Code		17.10
Purpose of Expenditure Mileage Category/ Type 002		LA	•		
Ms. Mary L Landrieu Calendar Year-To-Date President Senate State: LA					M - M / D - D / Y - Y - Y
Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought Senate State: LA Disbursement For: Primary General 2014 Other (specify) ▶ Runoff (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate		Support	Office	Sought: House District: 00
Per Election for Office Sought 554635.78 2014 Other (specify) Runoff (a) SUBTOTAL of Itemized Independent Expenditures	Ms. Mary L Landrieu				
(a) SUBTOTAL of Itemized Independent Expenditures			554635.78		
(c) TOTAL Independent Expenditures					Other (specify) Runon
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] Date Date Date	(a) SUBTOTAL of Itemized Independent E	xpenditures		•	47.10
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] Date Date	(b) SUBTOTAL of Unitemized Independen	t Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] Date Date					7 7 7
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] Date Date	(c) TOTAL Independent Expenditures			•	7 7
[Electronically Filed] Date 05 18 2015	with, or at the request or suggestion of, a	ny candidate or authorized			
Daic	Ms. Emily Buchanan	[Electron	ically Filed]	O.S	5 18 2015
	Signature				

	PAGE 127			
D	ENTIFICAT	ION N	UMBER	▼

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed of	on
Full Name of Payee	Date of Public Distribution/Dissemination
Joshua J Huffman	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 211 Dixie Ave	Amount
City State Zip Code	55.00
Harrisonburg VA 22801	Transaction ID : 3c275085-f806-47ba-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 19 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	rsement For: Primary General ☐ Other (specify) Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Stephanie L Heun	11 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8026 S Wilwood Dr Apt 101	Amount
City State Zip Code	10.00
Oak Creek WI 53154	Transaction ID: 56d7167a-463d-46ca-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 19 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	65.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	5 18 2015
Signature	

NAME OF COMMITTEE (In Full)

	PAGE 128 OF 320 FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼
	C C00530766
iled c	on Mam / Dad / Yayayay
	Date of Public Distribution/Dissemination
	11 / 19 / 2014
	Amount
\dashv	67.50
	ransaction ID : 7e59fc97-f9ea-4a89-b Date of Disbursement or Obligation
	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ffice	Sought: House District: 00
F	President X Senate State: LA
014 .	sement For: Primary General Other (specify) ► Runoff Runoff
	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
	Amount
	41.40
т	ransaction ID : aeb04024-3876-4c4c-9 Date of Disbursement or Obligation
	11 / 19 / Y Y Y Y Y
Office	Sought: House District: 00
	President X Senate State: LA
isbur 014	sement For: Primary General
517	Other (specify) ►Runoff
	108.90

Women Speak Out F	PAC		C C00530766
Check if 24-hour report	48-hour report New	report Amends repo	rt filed on
Full Name of Payee Jennifer F Gilbert	_		Date of Public Distribution/Dissemination
Jennilei F Gilbert			11 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 180 McN	eil Steep Hollow Rd		Amount
City	State	Zip Code	67.50
Carriere	MS	39426	Transaction ID : 7e59fc97-f9ea-4a89-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 19 / Y Y Y Y Y
Name of Federal Candidat	e	Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office		554635.78	Disbursement For: Primary General 2014 Runoff Runoff
Full Name of Payee			Date of Public Distribution/Dissemination
Jennifer F Gilbert			11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 180 McN	eil Steep Hollow Rd		Amount
City	State	Zip Code	41.40
Carriere	MS	39426	Transaction ID : aeb04024-3876-4c4c-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidat	e	Support	Office Sought: House District:00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized	Independent Expenditures		. ▶ 108.90
(b) SUBTOTAL of Unitemiz	ed Independent Expenditures		•
(c) TOTAL Independent Ex	penditures		•
with, or at the request or su			not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buche		ctronically Filed] Date	M / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Bate	

Signature

TEMIZED INDEPENDENT EXPENDITURES		PAGE 129 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Women Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
women opeak out i no		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on	= M / D = D / Y = Y = Y
Full Name of Payee Hannah J Landry		of Public Distribution/Dissemination
Mailing Address 1110 N Coolidge	L	11 19 2014
	Amour	
City State Zip Co		70.00
Gonzales LA 70737		ction ID: a157c676-151e-4250-a of Disbursement or Obligation
	egory/	11 19 / 2014
Name of Federal Candidate	Support Office Sough	t: House District: 00
Ms. Mary L Landrieu	X Oppose Preside	Tiouse District.
Outside West To Day	Disbursement	
Calendar Year-To-Date Per Election for Office Sought 5546	625.70 2014	ther (specify) Runoff
Full Name of Payee	Date of	of Public Distribution/Dissemination
Hannah J Landry	TM	11 19 2014
Mailing Address 1110 N Coolidge	Amou	التناات
City State Zip C	onde	21.09
Gonzales LA 7073	7 Transa	oction ID : 5de2c40e-3e08-4a77-a of Disbursement or Obligation
		11 19 / 2014
Name of Federal Candidate	Support Office Sough	nt: House District:00
Ms. Mary L Landrieu	X Oppose Preside	
Calendar Year-To-Date Per Election for Office Sought 554	Disbursemen 2014	nt For:
	<u> </u>	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·····	91.09
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7
(c) TOTAL Independent Expenditures	·	7
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized commparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically F	Filed] Date 05	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURI	ES			PAGE 130 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC ID	DENTIFICATION NUMBER ▼
Women Speak Out PAC			C	C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee Mary C Lee			Date of Public	C Distribution/Dissemination
Mailing Address				19 2014
1030 N Coolidge Ave			Amount	
City	State	Zip Code		70.00
Gonzales	LA	70737		: c6f4cf20-6e4f-4ccd-8 ursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 /	19 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose		Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: 2014	Primary General
Full Name of Payee Mary C Lee			Date of Public	c Distribution/Dissemination
Mailing Address 1030 N Coolidge Ave			Amount	النبا لنبا
		75.004		21.09
City Gonzales	State LA	Zip Code 70737		D: c170c421-928e-40d4-b ursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11	19 / 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		Oppose		Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: 2014 Other (sp	Primary General Decify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expendi	itures		•	91.09
(b) SUBTOTAL of Unitemized Independent Expe	nditures		· >	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
Ms. Emily Buchanan	[Electron	nically Filed]	M M / D D D D D D D D D D D D D D D D D	/ Y = Y = Y = Y = 2015
Signature		Date	03 18	2013

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)						
EMIZED INDEPENDENT EXPENDITURES					PAGE 131	OF 320 24 OF FORM 3X
IAME OF COMMITTEE (In Full)				EEC		ON NUMBER ▼
Women Speak Out PAC						ON NOWBER V
·				С	C00530766	
Check if 24-hour report 48-hour report	New report	Amends re	port filed	d on	/ D D /	Y I Y I Y I Y
Full Name of Payee Theresa a Youngblood				Date of Pul	blic Distribution	/Dissemination
				11	19	2014
Mailing Address 102 S Main Street Apt A2				Amount		
City Sta	ate Zip	Code				35.00
Berryville V	A 22	2611			ID: 10dbc516 sbursement or	
Purpose of Expenditure Salary	С	Category/ Type 00	1	11	19	2014
Name of Federal Candidate	I	Support	Offic	e Sought:	House	District: 00
Ms. Mary L Landrieu		X Oppose		President	X Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought	5	554635.78	Disb 2014	ursement For: Other (: Primary	General Runoff
Full Name of Payee			_			/Dissemination
Evelyn Lesaicherre				M M M	/ D D /	2014
Mailing Address 629 Radiance Ave				Amount		
City Sta	ate Zir	o Code				80.00
		0001			ID: 03f1cad7- sbursement or	
Purpose of Expenditure Salary	С	Category/ Type 00	1	M M M	19	2014
Name of Federal Candidate		Command	04:-	a Carrelate		District: 00
Ms. Mary L Landrieu		Support Oppose	Onic	e Sought:	House X Senate	State: LA
Calendar Year-To-Date			Dish	ursement For		y General
Per Election for Office Sought		554635.78	2014			Runoff
-						
(a) SUBTOTAL of Itemized Independent Expenditures			···· >			115.00
(b) SUBTOTAL of Unitemized Independent Expenditures						
					7	1 4
(c) TOTAL Independent Expenditures			····· >		7	
Under penalty of perjury I certify that the independent ewith, or at the request or suggestion of, any candidate or party committee) any political party committee or its ager	r authorized co					

[Electronically Filed]

18

05

Date

2015

	CHEDULE E (FEC Form 3	X)					
	EMIZED INDEPENDENT EXPEN	•				PAGE 13	2 OF 320
						FOR LINE	24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC	IDENTIFICAT	ION NUMBER ▼
V	Vomen Speak Out PAC				C	C00530766	
Ch	eck if 24-hour report 48-hour	report New r	eport Amends repo	ort filed on	M = M	/ D D	Y I Y I Y
	Full Name of Payee Evelyn Lesaicherre			Da	M = M	/ D D	n/Dissemination
	Mailing Address 629 Radiance Ave			Ar	11 nount	19	2014
	City	State	Zip Code	L	بب	, , , ,	3.60
	Metairie	LA	70001			ID : 7ad054a 1 bursement or	I-fbc5-4431-a Obligation
	Purpose of Expenditure Mileage		Category/ Type 002		M M M	/ 19	2014
	Name of Federal Candidate		Support	Office So	ught:	House	District: 00
	Ms. Mary L Landrieu		X Oppose	Pre	sident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburser 2014	_	Primar primar primar	General Runoff
	Full Name of Payee Brogan A Benoit			Da	M = M	/ D D	n/Dissemination
	Mailing Address 7144 South River Rd			Ar	11 mount	19	2014
	City	State	Zip Code	— Г			60.00
	Addis	LA	70710			ID: 17ed1cad	d-8a3e-4fb1-8
	Purpose of Expenditure Salary		Category/ Type 001		M 11	19	2014
	Name of Federal Candidate		Support	Office So	uaht:	House	District: 00
	Ms. Mary L Landrieu		Oppose		esident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ment For: Other (Prima	ry General Runoff
	(a) SUBTOTAL of Itemized Independent	Expenditures		•		7	63.60
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		. [1 47
	(c) TOTAL Independent Expenditures						

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

PAGE 133 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
- M / D = D / Y = Y = Y
of Public Distribution/Dissemination
11 19 / 2014
nt
6.30
ction ID : 812c6e23-067d-48e9-9 of Disbursement or Obligation
11 19 / 2014
t: House District: 00
ent Senate State: LA
tt For:
of Public Distribution/Dissemination
11 19 / 2014
int
75.00
oction ID : 3279104b-d3ae-449a-8 of Disbursement or Obligation
11 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: House District:00
ent X Senate State: LA
nt For: Primary General
Other (specify) P Runoff
81.30

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
Women Speak Out PAC				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed or	M M / D D / Y Y Y Y	
Full Name of Payee				Date of Public Distribution/Dissemination	
Brogan A Benoit				11 19 / 2014	
Mailing Address 7144 South River Rd			Δ	Amount	
City	State	Zip Code		6.30	
Addis	LA	70710		ansaction ID: 812c6e23-067d-48e9-9 Date of Disbursement or Obligation	
Purpose of Expenditure Mileage		Category/ Type 002		11 19 2014	
Name of Federal Candidate		Support	Office S	ought: House District: 00	
Ms. Mary L Landrieu		Oppose		resident Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought	, , , ,	554635.78	2014	ement For:	
Full Name of Payee Michael Vidrine			Г	Date of Public Distribution/Dissemination	
Wilchael Vidilile				11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1103 West Wilson Street			A	Amount	
City	State	Zip Code	— r	75.00	
Ville Platte	LA	70586		ansaction ID: 3279104b-d3ae-449a-8 Date of Disbursement or Obligation	
Purpose of Expenditure Salary		Category/ Type 001		11 19 / 2014	
Name of Federal Candidate		Support	Office S	Sought: House District:00	
Ms. Mary L Landrieu		Oppose		resident State: LA	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburse 2014	ement For: Primary General ✓ Other (specify) ► Runoff	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expe (c) TOTAL Independent Expenditures			, r		
.,			, r		
.,	ndent expenditures	reported herein were	not made		
(c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any cand	ndent expenditures didate or authorized its agent.	reported herein were	not made		

PAGE	134	OF	320
FOR L	INE 24	OF F	320 FORM 3X

						FOR LINE 2	4 OF FORM 3X
NAME OF COMMITTEE (In Full)					FEC ID	ENTIFICATION	ON NUMBER ▼
Women Speak Out PAC					C	C00530766	
Check if 24-hour report 48-hour report	New repo	ort Am	nends repo	ort filed on	M = M /	D D /	Y Y Y Y Y
Full Name of Payee				Date	of Public	Distribution/	Dissemination
Mailing Address 4402 West Wilson Chart					11 /	19	2014
1103 West Wilson Street				Amo	ount		
City	State	Zip Code		-			22.20
Ville Platte	LA	70586				: e6aa84f9-1	
Purpose of Expenditure Mileage		Category/ Type	002		11 /	19	2014
Name of Federal Candidate			Support	Office Sou	ght:	House	District: 00
Ms. Mary L Landrieu		X	Oppose	Presi	dent >	Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought	7	554635.7	В	Disburseme 2014	ent For: Other (sp	Primary	General Runoff
Full Name of Payee Carl Brent					e of Public	c Distribution/	/Dissemination
Mailing Address 6718 Lake Willow Dr				Amo	11 ount	19	2014
City	State	Zip Code					80.00
New Orleans	LA	70126		I): 6b4f4f6e-bursement or 0	
Purpose of Expenditure Salary		Category/ Type	001		11	19	2014
Name of Federal Candidate			Support	Office Sou	ght:	House	District:00
Ms. Mary L Landrieu		X	Oppose	Pres	ident \sum	Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	554635.7	8	Disbursement 2014	ent For: Other (sp	Primary pecify) ►	General Runoff
(a) SUBTOTAL of Itemized Independent Expenditure	es				1 7	1 1 - 7	102.20
(b) SUBTOTAL of Unitemized Independent Expenditu	ures			· • [-		
(c) TOTAL Independent Expenditures				· •	-		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its a	te or authorized						
Ms. Emily Buchanan	[Electron	ically Filed]	Date	, 05	18	/ Y Y 201	5 Y
Signature		_					

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	age# 13531353244		
36	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 135 OF 320
			FOR LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		
			C C00530766
Ch	neck if 24-hour report 48-hour report New r	report Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Carl Brent		11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6718 Lake Willow Dr		Amount
			Amount
	City State	Zip Code	12.60
	New Orleans LA	70126	Transaction ID: 8aed296e-206b-4fe9-a
			Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 19 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Christine Stevens		11 19 2014
	Mailing Address 100 Asbury Ct		Amount
	City State	Zip Code	70.00
	Winchester VA	22602	Transaction ID: 543752fd-941d-4503-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ 001	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре	11 19 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date	554635.78	Disbursement For: Primary General
	Per Election for Office Sought	, , , , , , , , , , , , , , , , , , , ,	Other (specify) Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 82.60
	(b) SUBTOTAL of Unitemized Independent Expenditures		
			7 7
	(c) TOTAL Independent Expenditures		>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	/ 18	2015
Signature					

S

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 136 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		
		C C00530766
Check if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
Full Name of Payee Jazmine d Conner		Date of Public Distribution/Dissemination
Jazinine d Connei		11 19 / 2014
Mailing Address 100 ASBURY CT		Amount
City State	Zip Code	70.00
WINCHESTER VA	22602	Transaction ID : 12941d59-e7bd-4e08-a
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
Salary	Type 001	11 19 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date	554635.78	Disbursement For: Primary General
Per Election for Office Sought	004000.70	Other (specify) Runoff
Full Name of Payee Jon E Conner		Date of Public Distribution/Dissemination
Jon E Connei		11 19 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 Asbury Ct		Amount
		70.00
City State Winchester VA	Zip Code 22602	70.00 Transaction ID : 6c4cd450-f739-44c6-9
	22002	Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 19 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
	Z oppose	
Calendar Year-To-Date Per Election for Office Sought	554635.78	2014
		Other (specify) Runoff
(a) CURTOTAL of Hamizad Independent Europaditures		140.00
(a) SUBTOTAL of Itemized Independent Expenditures		. • 140.00
(b) SUBTOTAL of Unitemized Independent Expenditures		. •
		4 4
(c) TOTAL Independent Expenditures		•
		7 7 7
Under penalty of perjury I certify that the independent expenditures	reported herein were	not made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized		
party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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2015

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

		OF 320 24 OF FORM 3X					
FEC IDENTIFICATION NUMBER ▼							
С	C00530766						
M = M	/ D D /	Y Y Y Y					
of Publ	ic Distribution	/Dissemination					
11 11	19	2014					
ount							
		70.00					
saction II	D: 3e7df017-a	a353-4192-9					
11	19	2014					
ght:	House	District: 00					
dent	X Senate	State: LA					
ent For:	Primary	General					
Other (s	pecify) 🕨	Runoff					
e of Publ		Runoff /Dissemination					
e of Publ		/Dissemination					
e of Publ	ic Distribution	/Dissemination					
e of Publ	ic Distribution	/Dissemination					
e of Publ	ic Distribution	/Dissemination					
e of Publ	ic Distribution 19 19	/Dissemination					
11 11 Dunt saction I e of Disb	D: 25a14d1c	70.00 -b02a-4766-9 Obligation					
e of Publing Manager 11 Section I e of Disb	D: 25a14d1cursement or 0	70.00 -b02a-4766-9 Obligation Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
e of Publ 11 punt saction I e of Disb 11 ght:	D: 25a14d1cursement or 0	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA					
saction I e of Disb	D: 25a14d1cursement or 0 House Senate	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA					
saction I e of Disb	D: 25a14d1cursement or 0 House Senate Primary	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA					
saction I e of Disb	D: 25a14d1cursement or 0 House Senate Primary	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA General Runoff					
saction I e of Disb	D: 25a14d1cursement or 0 House Senate Primary	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA General Runoff					
saction I e of Disb	D: 25a14d1cursement or 0 House Senate Primary	70.00 -b02a-4766-9 Obligation 2014 District: 00 State: LA General Runoff					

Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Rodney O Culbreath Mailing Address 100 Asbury Ct Amo City State Zip Code VA Winchester 22602 Trans Date Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Office Soud Ms. Mary L Landrieu Oppose Presi Disburseme Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Rze Culbreath Mailing Address 100 Asbury Ct Amo City State Zip Code Winchester VA22602 Trans Date Purpose of Expenditure Category/ 001 Salary Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presi Disburseme Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)			
T	EMIZED INDEPENDENT EXPENDITURES			PAGE 138 OF 320 FOR LINE 24 OF FORM 3X
V/	ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC			C C00530766
Ch	neck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed o	n
	Full Name of Payee Christopher Marquess			Date of Public Distribution/Dissemination
	Mailing Address 110 W Pecan St			11 19 2014
	THO WIT GOALL OF		1	Amount
	City State	Zip Code		50.00
	Ville Platte LA	70586		ransaction ID: c976a732-f212-4e60-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 19 / 2014
	Name of Federal Candidate	Support	Office S	Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	sement For:
	Full Name of Payee Christopher Marquess			Date of Public Distribution/Dissemination 11 19 2014
	Mailing Address 110 W Pecan St			Amount
	City State	Zip Code		32.40
	Ville Platte LA	70586	I .	ransaction ID : 7cd8ce74-0e89-4293-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002		11 19 / 2014
	Name of Federal Candidate	Support	Office	Sought: House District: 00
	Ms. Mary L Landrieu	Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	sement For:
	(a) SUBTOTAL of Itemized Independent Expenditures			82.40
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •	
	(c) TOTAL Independent Expenditures		·· •	
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			

[Electronically Filed]

05

Date

18

2015

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES		PAGE 139 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Cathy Longtin		11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 827 Navavre Ave		Amount
City State Zip C	Code	85.00
New Orleans LA 7012		Transaction ID: 1417964c-0938-4c11-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cate	egory/ Type 001	11 19 / 2014
Name of Federal Candidate	Support Office	e Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date		ursement For: Primary General
	1635.78 2014	
Full Name of Payee		Date of Public Distribution/Dissemination
Cathy Longtin		11 19 2014
Mailing Address 827 Navavre Ave		
OZI NAVAVIC AVC		Amount
City State Zip C	Code	9.90
New Orleans LA 7012	24	Transaction ID: 46e311dc-edbd-4c75-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Cate	egory/ Type 002	11 19 / 2014
Name of Federal Candidate	Support Office	e Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date		ursement For: Primary General
	4635.78 2014	Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		94.90
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically 1	Filed] Date 0	5 18 2015
Signature	Date	25.5

mage# 15951393249					
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 140 OF 320		
	EMIZED INDEPENDENT EXPENDITORES		PAGE 140 OF 320 FOR LINE 24 OF FORM 3X		
VΑ	ME OF COMMITTEE (In Full)				
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼		
			C C00530766		
			M = M / D = D / Y = Y = Y		
Ch	eck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on		
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination		
	Collott R Overcasti		11 19 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 121 Ohara Dr		Amount		
	City State	Zip Code	94.00		
	Salisbury NC	28147	Transaction ID: 0b269fbb-958e-4023-b Date of Disbursement or Obligation		
	Purpose of Expenditure Salary	Category/ 001	11 19 2014		
	,	Type 001	11 19 2014		
	Name of Federal Candidate	Support	Office Sought: House District:00		
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA		
	Calendar Year-To-Date	FF 400F 70	Disbursement For: Primary General		
	Per Election for Office Sought	554635.78	2014		
	Full Name of Payee		Date of Public Distribution/Dissemination		
	Colton R Overcash		11 19 2014		
	Mailing Address 121 Ohara Dr				
	121 Ollara Di		Amount		
	City State	Zip Code	61.80		
	Salisbury	28147	Transaction ID: 89c861db-63b3-455a-b		
	Purpose of Expenditure	Category/	Date of Disbursement or Obligation		
	Mileage	Type 002	11 19 2014		
	Name of Federal Candidate	Support	Office Sought: House District:00		
	Ms. Mary L Landrieu	Oppose	President State: LA		
	Calendar Year-To-Date		Disbursement For: Primary General		
	Per Election for Office Sought	554635.78	2014		
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 155.80		
	(b) SUBTOTAL of Unitemized Independent Expenditures				
	(a) Control of Childring and Proportion Exponentials		7		
	(c) TOTAL Independent Expenditures				
			7 7 7		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 /	18	/	2015
Signature						
0.9						

PAGE 141 OF 320 FOR LINE 24 OF FORM 3X

	TON LINE 24 OF TONIN 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends re	eport filed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Elvis Spears Mailing Address 2450 Hans St	11 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2150 Hope St	Amount
City State Zip Code	80.00
New Orleans LA 70119	Transaction ID : 39c7a6fd-ad8b-49d7-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 00	01 11 19 / 2014
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 Runoff
Full Name of Payer	
Full Name of Payee Elvis Spears	Date of Public Distribution/Dissemination 11 19 2014
Mailing Address 2150 Hope St	Amount
City State Zip Code	6.30
New Orleans LA 70119	Transaction ID : 3dbfd972-035c-4673-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 00	11 / 19 / 2014
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	86.30
(b) SUBTOTAL of Unitemized Independent Expenditures	····· >
(c) TOTAL Independent Expenditures	······ >
Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	ate 05 18 2015
Signature	ate US 18 2015

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HEDULE E (FEC FORM 3X)				
MIZED INDEPENDENT EXPENDITURES	PAGE	142	OF	320
	FOR L	INE 24	OF FO	ORM

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Women Speak Out PAC	C C00530766			
Check if 24-hour report 48-hour report Ne	ew report Amends report filed on Amends report			
Full Name of Payee	Date of Public Distribution/Dissemination			
Hannah J Landry Mailing Address 4440 N Coolings	11 / 20 / Y Y Y Y Y Y			
1110 N Coolidge	Amount			
City State	Zip Code 40.00			
Gonzales LA	70737 Transaction ID: 84606fcd-ab90-4e6c-b Date of Disbursement or Obligation			
Purpose of Expenditure Salary	Category/ Type 001 11 20 / 2014			
Name of Federal Candidate	Support Office Sought: House District: 00			
Ms. Mary L Landrieu	Oppose President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff			
Full Name of Payee Hannah J Landry	Date of Public Distribution/Dissemination			
Mailing Address 1110 N Coolidge	11 20 2014 Amount			
City State	Zip Code 6.33			
Gonzales LA	70737 Transaction ID : 6fa7adba-51c1-4775-b Date of Disbursement or Obligation			
Purpose of Expenditure Mileage	Category/ Type 002 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Office Sought: House District: 00			
Ms. Mary L Landrieu	Oppose President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014			
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	—————————————————————————————————————			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Ms. Emily Buchanan [E	lectronically Filed] Date 05 18 2015			
Signature	Date			

PAGE 143 OF 320 FOR LINE 24 OF FORM 3X					
FEC IDENTIFICATION NUMBER ▼					
C C00530766					
M = M / D = D / Y = Y = Y					
e of Public Distribution/Dissemination M 1					
40.00					
saction ID : 8d6c0bce-3aa8-4c5c-9					
e of Disbursement or Obligation 11 20 2014					
ght: House District: 00					
dent X Senate State: LA					
ent For: Primary General					
Other (specify) ▶Runoff					
e of Public Distribution/Dissemination					
11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
ount					
6.33					
saction ID: dfcb67a3-3c6f-4460-8 e of Disbursement or Obligation					
11 20 / Y Y Y Y Y					
ght: House District: 00					
ident Senate State: LA					
ent For: Primary General					
Other (specify) ▶Runoff					
46.33					

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Women Speak Out PAC	C C00530766			
Check if 24-hour report 48-hour report New report Amends report filed o	n			
	Date of Public Distribution/Dissemination			
Mary C Lee	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1030 N Coolidge Ave	Amount			
City State Zip Code	40.00			
Gonzales LA 70737 T	ransaction ID : 8d6c0bce-3aa8-4c5c-9 Date of Disbursement or Obligation			
Purpose of Expenditure Salary Category/ Type 001	11 / 20 / 2014			
Name of Federal Candidate Support Office S	Sought: House District: 00			
Mc Many Ll andrigu	President X Senate State: LA			
554635.78	Sement For: Primary General Nother (specify) ► Runoff			
	Date of Public Distribution/Dissemination			
Mary C Lee	11 20 2014			
Mailing Address 1030 N Coolidge Ave	Amount			
001124100	6.33 ransaction ID : dfcb67a3-3c6f-4460-8			
Purpose of Expenditure Mileage Category/ Type 002	Date of Disbursement or Obligation			
Name of Fodovsk Condidate				
Ms Mary Llandrieu	Sought: House District: 00 President Senate State: LA			
	sement For: Primary General			
Per Election for Office Sought	X Other (specify) ►Runoff			
(a) SUBTOTAL of Itemized Independent Expenditures	46.33			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Ms. Emily Buchanan [Electronically Filed]	M / 18 2015			
Signature Date 05	10 2013			

PAGE	144	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	port Amends report	t filed on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Theresa a Youngblood		11 20 Y Y Y Y Y Y Y
Mailing Address 102 S Main Street Apt A2		Amount
City State	Zip Code	25.00
Berryville VA	22611	Transaction ID: 7e4050c9-2f1e-4fc3-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Runoff
		Other (speedly)
Full Name of Payee Lilly Green		Date of Public Distribution/Dissemination
Mailing Address 205 Medallion Circle		11
City State	Zip Code	40.00
Shreveport LA	71119	Transaction ID: 1088350f-0d14-4221-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		65.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015
Signature		

SCHEDULE E (FEC Form 3X)

SCHEDOLL L (FLC FOIIII 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 145 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on Mam / Dad / Yayayay
Full Name of Payee				Date of Public Distribution/Dissemination
Lilly Green				11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 205 Medallion Circle				Amount
				5100
l '	State	Zip Code		54.00
- Cimo roport	LA	71119		Transaction ID: 32589fa4-0f04-4e44-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 20 / Y Y Y Y Y 2014
Name of Federal Candidate		Support	Office	e Sought: House District: 00
Ms. Mary L Landrieu		X Oppose		President X Senate State: LA
Calendar Year-To-Date			Disbu	ursement For: Primary General
Per Election for Office Sought		554635.78	2014	
Full Name of Payee				Date of Public Distribution/Dissemination
Stephanie L Heun				11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8026 S Wilwood Dr Apt 101				
3323 3333 2				Amount
City	State	Zip Code		20.00
Oak Creek	WI	53154		Transaction ID : 1a29ee51-2d32-4c3a-b Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M M / D D / Y Y Y Y
Salary		Type 001		11 20 2014
Name of Federal Candidate		Support	Office	e Sought: House District: 00
Ms. Mary L Landrieu		X Oppose		President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	ursement For: Primary General Nother (specify) ► Runoff
				Carlot (opeonly)
(a) SUBTOTAL of Itemized Independent Expenditures.			··· •	74.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		··· >	
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Experimitures			▶	7 7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Ms. Emily Buchanan	[Electron	ically Filed]	te 0	18 2015

	PAGE 146 OF 320 FOR LINE 24 OF FORM 3X
EC IE	DENTIFICATION NUMBER ▼
	C00530766
M /	D = D / Y = Y = Y
Public	Distribution/Dissemination
M /	20 / 2014
-	40.00
	: fbb1b6f3-b5eb-452b-8 irsement or Obligation
M /	20 / 2014
	House District: 00

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour re	port New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee			Date	e of Public Distribution/Dissemination
Jenny N Brown				11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1270 Lovelady Rd			Amo	ount
City	State	Zip Code		40.00
West Monroe	LA	71292		saction ID : fbb1b6f3-b5eb-452b-8 e of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 20 2014
Name of Federal Candidate		Support	Office Sou	ight: House District: 00
Ms. Mary L Landrieu		Support Oppose		sident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	ent For: Primary General Other (specify) ▶ Runoff
Full Name of Page				Other (Speedly) F
Full Name of Payee Jenny N Brown			Dat	te of Public Distribution/Dissemination
Mailing Address 1270 Lovelady Rd			Δm	11 20 2014
			7	io di il
City	State	Zip Code		12.00
West Monroe	LA	71292		saction ID: b0be7ce7-2ed5-4a9f-8 te of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 20 / 2014
Name of Federal Candidate		Support	Office Sou	ught: House District: 00
Ms. Mary L Landrieu		Oppose		sident Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	
(a) SUBTOTAL of Itemized Independent Ex	rpenditures			52.00
(b) SUBTOTAL of Unitemized Independent	Expenditures		•	7 7 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	y candidate or authorized			
Ms. Emily Buchanan	[Electroni	cally Filed] Date	M M	/ 18 2015
Signature		_ Date		

S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)						
T	EMIZED INDEPENDENT EXPENDITURES				PAGE 147	OF 320 24 OF FORM 3X	_
NI A	AME OF COMMITTEE (In Full)						_
	Vomen Speak Out PAC			FEC	IDENTIFICATI	ON NUMBER ▼	
				C	C00530766		
Cł	neck if 24-hour report 48-hour report New re	eport Amends repo	ort filed or	n Mark	/ D D /	Y Y Y Y	
	Full Name of Payee			Date of Pub	olic Distribution	/Dissemination	
	Cathy Longtin			11	20 /	2014	l
	Mailing Address 827 Navavre Ave		<i>A</i>	Amount			
	City State	Zip Code				45.00	1
	New Orleans LA	70124			ID: f46d1742- bursement or (ı
	Purpose of Expenditure Salary	Category/ Type 001		M M M	/ 20 /	2014	l
	None of Fodoril Contibute	.,,,,,					_
	Name of Federal Candidate	Support	Office S	ought:	House	District: 00	-
	Ms. Mary L Landrieu	Oppose	Pi	resident	X Senate	State: LA	-
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ement For:		General Runoff	
	Full Name of Payee			Date of Pul	blic Distribution	/Dissemination	
	Cathy Longtin			M = M	/ D D /	2014	i
	Mailing Address 827 Navavre Ave		A	Amount	20	2014	
	City State	Zip Code	— I			6.30	1
	New Orleans LA	70124	Tr	ransaction	ID : e55b5afd-	1 1 10 1	4
		10124			sbursement or		
	Purpose of Expenditure Mileage	Category/ Type 002		11	20	2014	
	Name of Federal Candidate	Support	Office S		House	District: 00	_
	Ms. Mary L Landrieu	Oppose		resident	Senate	State: LA	_
	Calendar Year-To-Date	"		ement For:	Primary	y General	
	Per Election for Office Sought	554635.78	2014	Other ((specify) ►	Runoff	_
_							_
	(a) SUBTOTAL of Itemized Independent Expenditures		▶		7-	51.30	
	(b) SUBTOTAL of Unitemized Independent Expenditures						ĺ
			-		7-		ı
	(c) TOTAL Independent Expenditures		··· •		7		
_	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.						

[Electronically Filed]

05

Date

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PAGE	148	OF	320
FOR L	INE 24	OF F	320 ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Tammay Williams		Date of Public Distribution/Dissemination
		11 20 / Y Y Y Y Y Y
Mailing Address 924 N. Prieur St		Amount
City State Zip C	Code	80.00
New Orleans LA 701	16	Transaction ID: 29d8d5ab-03b0-4e76-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cat	egory/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District:00
Ms. Mary L Landrieu		President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbur 2014	rsement For:
Full Name of Payee Tammay Williams Mailing Address 924 N. Prieur St		Date of Public Distribution/Dissemination
924 N. Prieur St		Amount
City State Zip 0	Code	15.00
New Orleans LA 701	16	Transaction ID: 9bde1731-db80-4c3c-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Cat	egory/ Type 002	11 20 2014
Name of Federal Candidate	Support Office	Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought 55	Disbut 2014	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·····	95.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	1 4 1 4 1 6
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically	Filed] Date 05	5 18 2015
Signature		

TEMIZED INDEPENDENT EXPENDITUR	FS			PAGE 149 OF 320
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New re	report Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payee Antoinette Franklin				Public Distribution/Dissemination
Mailing Address 8822 Apple St			1 Amount	سنيا لنا ك
			,	
City	State	Zip Code		60.00
New Orleans	LA	70188		ion ID : bfde7ab6-5bb7-4660-9 Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	M 1	1 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		Oppose	Presiden	t X Senate State: LA
Calendar Year-To-Date		•	Disbursement I	
Per Election for Office Sought		554635.78	2014	er (specify) Runoff
Full Name of Payee				Public Distribution/Dissemination
Antoinette Franklin				M / D D / Y Y Y Y
Mailing Address 8822 Apple St				1 20 2014
OOZZ APPIE GI			Amount	
City	State	Zip Code		12.00
New Orleans	LA	70188		tion ID : 5b4e1188-fb05-4a02-a
Purpose of Expenditure		Category/		Disbursement or Obligation
Mileage		Type 002		1 20 2014
Name of Federal Candidate		Support	Office Sought:	House District:00
Ms. Mary L Landrieu		Oppose	Presiden	nt X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014 Coth	For: Primary General er (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expend	litures		•	72.00
(b) SUBTOTAL of Unitemized Independent Expe	enditures		· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			· [4
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any can party committee) any political party committee or	ididate or authoriz			
Ms. Emily Buchanan	[Electi	ronically Filed] Date	0.5	18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Date

SCHEDULE E (FEC Form 3X)

SCILEDOLL L (FLC FOIII 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 150 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee Date Heather A Smith	te of Public Distribution/Dissemination
Mailing Address	11 20 7 2014
993 Clairbonne Ro	nount
City State Zip Code	10.00
	nsaction ID: b8d29e25-01f0-40ab-a te of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sou	ught: House District: 00
Ms. Mary L Landrieu	sident State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursem 2014	nent For:
	ate of Public Distribution/Dissemination
Mailing Address 9425 Jessica Drive Am	nount
City State Zip Code	52.50
Shreveport LA 71106 Tran	nsaction ID: 4a9a39d0-46b7-48ac-8 ate of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 2014
Name of Federal Candidate Support Office Sou	ught: House District: 00
Ms. Mary L Landrieu Oppose Pres	esident State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursem 2014	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	62.50
(a) SOBTOTAL OF HORIZON PROPORTION EXPONENTIAL COMMISSION PROPORTION COMMISSION PROPORTION COMMISSION COMMISSI	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	/ 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES		DAGE 454 OF 220
IEMIZED INDEPENDENT EXPENDITURES		PAGE 151 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
Full Name of Payee Gary W Fuhrmann		Date of Public Distribution/Dissemination
Mailing Address 9425 Jessica Drive		Amount 20 2014
City State	Zip Code	8.40
Shreveport LA	71106	Transaction ID: 03ba77f5-86fc-408b-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 20 / Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General
	1 1 /8 1	Other (specify)
Full Name of Payee Eva M Johnston		Date of Public Distribution/Dissemination
Mailing Address 2517 N 47th St		Amount
City State	Zip Code	10.00
Milwaukee WI	53210	Transaction ID : e0dd9853-03b9-4876-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 18.40
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) SOBTOTAL OF GIMOTHEON HIGGSTREAM EXPONENTIAL OF GIMOTHEON		7 7
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	3 05 18 2015

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓΙ	EMIZED INDEPENDENT EXPENDITURES		PAGE 152 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on
	Full Name of Payee Maegan E McDaniel		Date of Public Distribution/Dissemination
	Mailing Address 3009 Skelly St		Amount
	City State	Zip Code	40.00
	Shreveport LA	71107	Transaction ID : dcbe1661-c2c3-45b6-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee Maegan E McDaniel		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 3009 Skelly St		11 20 2014 Amount
	City State	Zip Code	13.50
	Shreveport LA	71107	Transaction ID : 8ebe2201-25d9-440b-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 / Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		53.50
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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S

Ms. Emily Buchanan

Signature

	HEDULE E (FEC Form 3X)		
ΓΕ	MIZED INDEPENDENT EXPENDITURES		PAGE 153 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VV	omen Speak Out PAC		C C00530766
Che	eck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on
Т	Full Name of Payee Bobbie M Steinsholt		Date of Public Distribution/Dissemination
			11 20 / Y Y Y Y
	Mailing Address 3009 Skelly St		Amount
ŀ	City State	Zip Code	40.00
	Shreveport LA	71107	Transaction ID : 50509e72-7a2d-4aca-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y Y
ı	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	John K Necaise III		11 20 7 2014
	Mailing Address 1905 Franklin Ave		Amount
ŀ	City State	Zip Code	40.00
	New Orleans LA	70117	Transaction ID: ce993370-26e3-478a-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / 2014
ŀ	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
ŀ	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
(a) SUBTOTAL of Itemized Independent Expenditures		80.00
(b) SUBTOTAL of Unitemized Independent Expenditures		-
(c) TOTAL Independent Expenditures		
٧	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES		DAGE 454 OF 220
IEMIZED INDEPENDENT EXPENDITURES		PAGE 154 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New r	report Amends repo	ort filed on
Full Name of Payee John K Necaise III		Date of Public Distribution/Dissemination
Mailing Address 1905 Franklin Ave		11 20 2014 Amount
Chata	Zin Ondo	0.94
City State New Orleans LA	Zip Code 70117	9.84
	/011/	Transaction ID : 1709c7db-e7aa-4a39-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
Full Name of Payee		Date of Public Distribution/Dissemination
Janet Morris		M = M / D = D / Y = Y = Y
Mailing Address 620 Old Barbome Rd Lot 2		11 20 2014
620 Old Barbome Rd Lot 2		Amount
City State	Zip Code	12.50
West Monroe LA	71291	Transaction ID: 88ad587e-6c99-4e85-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
•		
(a) SUBTOTAL of Itemized Independent Expenditures		▶ 22.34
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electr	ronically Filed] Date	9 05 18 2015

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TEMIZED INDEPENDENT EXPENDIT	URES		PAGE 155 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour report	ort New	report Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee Janet Morris			Date of Public Distribution/Dissemination
Mailing Address 620 Old Barbome Rd Lot 2	<u> </u>		11
City	State	Zip Code	3.72
West Monroe	LA	71291	Transaction ID : 55744270-4df6-48f2-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M M / D D / Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
Full Name of Payee			Date of Public Distribution/Dissemination
Amanda Boley			M = M / D = D / Y = Y = Y
Mailing Address Split Oak Drive			11 20 2014 Amount
City	State	Zip Code	81.50
charlotte	NC	28227	Transaction ID: 24f13988-b93d-4305-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 General Cother (specify) ► Runoff
			Other (specily)
(a) SUBTOTAL of Itemized Independent Exp	oenditures		85.22
(b) SUBTOTAL of Unitemized Independent E	Expenditures		
(c) TOTAL Independent Expenditures			
			e not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

Under with, party

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	/ 18	2015
Signature					

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES		PAGE 156 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report fil	iled on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Amanda Boley		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address Split Oak Drive		Amount
City State Zip	Code	23.19
charlotte NC 282		Transaction ID: 0792fbe2-bb67-43cb-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Ca	ategory/ Type 002	11 20 / 2014
Name of Federal Candidate	Support Off	ffice Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date		sbursement For: Primary General
		Other (specify) Runoff
Full Name of Payee		Date of Public Distribution/Dissemination
Heather Ainsworth		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 9685 Paula St		
3000 T adia Ot		Amount
City State Zip	Code	90.00
	047	Transaction ID: 2446e9da-58c7-489f-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Ca	ategory/ Type 001	11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Of	ffice Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date		isbursement For: Primary General
	554635.78 20	Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically	y Filed] Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	

	CHEDULE E (FEC Form 3X)		
Γŧ	EMIZED INDEPENDENT EXPENDITURES		PAGE 157 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		<u> </u>
	Women Speak Out PAC		C C00530766
_ Cł	heck if 24-hour report 48-hour report New I	report Amends report f	filed on M=M / D=D / Y=Y=Y
_	Full Name of Payee Heather Ainsworth		Date of Public Distribution/Dissemination
	Mailing Address 9685 Paula St		11 20 2014
	- 9000 Faula St		Amount
	City State	Zip Code	22.80
	Keithville LA	71047	Transaction ID : 44f67fbd-999a-48be-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 / 2014
	Name of Federal Candidate	Support O	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Solution Other (specify) Runoff
	Full Name of Payee ERIC TABARY		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 6101 NORA ST		Amount
	City State	Zip Code	65.00
	METAIRIE LA	70003	Transaction ID : acd447ea-0dbb-4f54-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support C	Office Sought: House District: 00
	Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
-	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 ✓ Other (specify) Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures)	87.80
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
_	(c) TOTAL Independent Expenditures	······································	·
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

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Date

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TE	EMIZED INDEPENDENT EXPENDITURES						PAGE 158 FOR LINE 2	OF 320 4 OF FORM 3X
	AME OF COMMITTEE (In Full)					FEC II	DENTIFICATION	ON NUMBER ▼
W	Vomen Speak Out PAC					С	C00530766	
	neck if 24-hour report 48-hour report	New repo	ort Amend	ds repor	rt filed on	M = M	/ D = D /	Y = Y = Y = Y
	Full Name of Payee				Date	of Publi	c Distribution/	Dissemination
	ERIC TABARY					M M 11	/ 20 /	2014 Y
	Mailing Address 6101 NORA ST				Amo	ount		
	City	State	Zip Code		$- \Gamma$			2.40
	METAIRIE	LA	70003				D: 93128bb2- ursement or C	
	Purpose of Expenditure Mileage		Category/ Type	002] [M 11	20	2014
	Name of Federal Candidate		Supp	nort	Office Soug	nht:	House	District: 00
	Ms. Mary L Landrieu		X Oppo		President		Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought	,	554635.78]	Disburseme 2014	ent For: Other (sp	Primary Decify) ▶	General Runoff
	Full Name of Payee				Date	of Publi	ic Distribution/	Dissemination
	Gregory Green					M = M	/ D D /	YYYYY
	Mailing Address				<u> </u>	11	20	2014
	2506 Bolch Street				Amo	ount		
	City	State	Zip Code	-				40.00
	Shreveport	LA	71104				D: 016d4ee8- ursement or C	
	Purpose of Expenditure Salary		Category/ Type	001] [11 11	20	2014
	Name of Federal Candidate		Sup	oport	Office Soug	ght:	House	District:00
	Ms. Mary L Landrieu		У Орр		Presi	dent	Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78		Disburseme 2014		Primary	General Runoff
_								
	(a) SUBTOTAL of Itemized Independent Expenditures	j			· [-		42.40
	(b) SUBTOTAL of Unitemized Independent Expenditur	res						
					,	7	7	
	(c) TOTAL Independent Expenditures				•		7	
1	Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ac	e or authorized						
	Ms. Emily Buchanan	[Electron	nically Filed]	Date	M M /	18	/ Y Y 201:	5
	Signature		_	Date			حصا ل	-

S П

Ms. Emily Buchanan

Signature

3(CHEDULE E (FEC Form 3X)		
ΓΙ	EMIZED INDEPENDENT EXPENDITURES		PAGE 159 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
			C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Gregory Green		11 20 / Y Y Y Y Y
	Mailing Address 2506 Bolch Street		Amount
	City State	Zip Code	55.20
	Shreveport LA	71104	Transaction ID : 2ee8471b-799d-46ed-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 / Y Y Y Y Y Y
	Name of Federal Candidate	Cumport	Office Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee		Date of Public Distribution/Dissemination
	Laura U Logie		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2565 Shire Circle		Amount
	City State	Zip Code	35.00
	Harrisonburg VA	22801	Transaction ID : 2704fdd1-823f-4d3b-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 2014
	Name of Federal Candidate		Office Sought: House District: 00
	Ms. Mary L Landrieu	Support	Office Sought.
	Wo. Way E Editariou	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 90.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		
			7 7 7
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

SCHEDULE ITEMIZED INDI

ne of committee (in full) omen Speak Out PAC		FOR LINE 24 OF FORM 3X
omen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
		C C00530766
ck if 24-hour report 48-hour report	New report Amends repo	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones		11 20 / Y Y Y Y Y Y Y
Mailing Address 4106 Martha St		Amount
City	State Zip Code	80.00
	LA 71109	Transaction ID : f7ea4a6c-9cbe-427e-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Oder de Vere Te Dete	X oppose	Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	554635.78	2014 Other (specify) ▶ Runoff
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones		11 20 / Y Y Y Y Y
Mailing Address 4106 Martha St		Amount
		0.00
,	State Zip Code LA 71109	9.60 Transaction ID : 44c10542-bab4-48a6-8
Shreveport		Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 20 7 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
		Disbursement For: Primary Genera
Calendar Year-To-Date	554635.78	2014

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Date

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES	PAGE 161 OF 320
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼
Women Speak Out i Ao	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	I on M / D D / Y Y Y Y
Full Name of Payee Beau Autin	Date of Public Distribution/Dissemination
Mailing Address 345 Auroura Ave	11 20 2014 Amount
200	45.00
City State Zip Code Metairie LA 70006	45.00
	Transaction ID : f51acbb8-beaf-4b05-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 / 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary General
Full Name of Payee Beau Autin	Date of Public Distribution/Dissemination 11 20 2014
Mailing Address 345 Auroura Ave	Amount
City State Zip Code	1.71
Metairie LA 70006	Transaction ID : 13e33188-076d-40b9-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	46.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
Ms. Emily Buchanan	M / D D / Y Y Y

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Date

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PAGE		OF	320
FOR L	INE 24	OF F	ORM 3X
DENTIF	CATIO	NUM P	BER ▼
C00530	-	N NUM	BER ▼

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
	C C00530766
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report file	
Full Name of Payee	Date of Public Distribution/Dissemination
Brogan A Benoit	11 18 2014
Mailing Address 7144 South River Rd	Amount
City State 7in Code	60.00
City State Zip Code Addis LA 70710	Transaction ID : b246c241-9363-4d19-8
Addis LA 70710	Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	ice Sought: House District: 00
Ma Marcel Landing	- Tiouse Bistriot.
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calcillati 10 Bato	bursement For: Primary General
Per Election for Office Sought 554635.78 201	Other (specify) Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Brogan A Benoit	11 18 2014
Mailing Address 7144 South River Rd	- Lin Lin Linin
7 144 South River Ru	Amount
City State Zip Code	6.90
	Transaction ID : ea94033a-e234-4055-8
1600	Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	M = M / D = D / Y = Y = Y
Mileage 002 Type 002	11 18 2014
Name of Federal Candidate Support Off	ice Sought: House District: 00
Mr. Marsel I and Free	
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calcindal Teal to Bate	sbursement For: Primary General
Per Election for Office Sought 554635.78 20	Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	66.90
(-)	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) 300101AL of Officernized independent Expenditures	45 45 45
4	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not	
with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	ier, or (if the reporting entity is not a political
Ms. Emily Buchanan	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	05 18 2015
Signature	

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form : EMIZED INDEPENDENT EXPEN					PAGE 163	OF 320
N	AME OF COMMITTEE (In Full)				FEC.		4 OF FORM 3X
	Women Speak Out PAC				C	C00530766	ON NUMBER ▼
С	heck if 24-hour report 48-hou	r report New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y = Y = Y = Y
	Full Name of Payee Eva M Johnston			Dat	e of Publ	lic Distribution/I	Dissemination 2014
	Mailing Address 2517 N 47th St			Am	ount	10	2014
	City Milwaukee	State WI	Zip Code 53210			D : db438013- 1 bursement or O	
	Purpose of Expenditure Salary		Category/ Type 001		M M M 11	/ 18	2014
	Name of Federal Candidate		Support	Office Sou	ght:	House [District: 00
	Ms. Mary L Landrieu		Oppose	Pres	sident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	ent For: Other (s	Primary pecify) ▶	General Runoff
	Full Name of Payee Evelyn Lesaicherre Mailing Address 629 Radiance Ave				11 nount	lic Distribution/	2014
	City	State	Zip Code				80.00
	Metairie	LA	70001			D: 5f21a2a1-d	
	Purpose of Expenditure Salary		Category/ Type 001		M M 11	17	2014
	Name of Federal Candidate		Support	Office Sou	ıght:	House	District: 00
	Ms. Mary L Landrieu		Oppose	Pres	sident	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursem 2014	nent For: Other (s	Primary	General Runoff
	(a) SUBTOTAL of Itemized Independen	ıt Expenditures		•	7		95.00
	(b) SUBTOTAL of Unitemized Independent	lent Expenditures		• •		7	
	(c) TOTAL Independent Expenditures			•		-7-	
	Under penalty of perjury I certify that the with, or at the request or suggestion of party committee) any political party committee.	, any candidate or authorized					

[Electronically Filed]

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Date

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES		2005 464 05 220
IEMIZED INDEPENDENT EXPENDITURES		PAGE 164 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	port Amends repo	rt filed on
Full Name of Payee Evelyn Lesaicherre		Date of Public Distribution/Dissemination
Mailing Address 629 Radiance Ave		11 17 2014 Amount
City State	Zip Code	3.60
Metairie LA	70001	Transaction ID : 429e1cbe-9c7c-436b-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Full Name of Payee ERIC TABARY		Date of Public Distribution/Dissemination 11
Mailing Address 6101 NORA ST		Amount
City State	Zip Code	70.00
METAIRIE LA	70003	Transaction ID: 493b48af-8740-4563-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 17 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		73.60
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015

S	CHEDULE E (FEC Form 3X)						
ITI	EMIZED INDEPENDENT EXPENDIT	URES				PAGE 165	OF 320 24 OF FORM 3X
N/	AME OF COMMITTEE (In Full)						
	Vomen Speak Out PAC				FEC	IDENTIFICATI	ON NUMBER ▼
					C	C00530766	
Cł	neck if 24-hour report 48-hour report	ort New rep	port Amends repo	ort filed on	M = M	/ D = D /	Y = Y = Y
	Full Name of Payee ERIC TABARY			Da			/Dissemination
	Mailing Address				11	17	2014
	6101 NORA ST			Aı	mount		
	City	State	Zip Code				1.50
	METAIRIE	LA	70003	-		D: a2c10a53-	
	Purpose of Expenditure Mileage		Category/ Type 002		11	17	2014
	Name of Federal Candidate		Support	Office Sc	ought:	House	District:00
	Ms. Mary L Landrieu		Oppose		_	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	2014	ment For:	Primary	General Runoff
	Full Name of Payee			D	ate of Pub	lic Distribution	n/Dissemination
	Julia Perry				м = м 11	/ 20 /	2014
	Mailing Address 2046 Perrin St Apt C			А	mount		
	City	State	Zip Code	— Г			80.00
	Shreveport	LA	71101			ID: 83c887ee	
	Purpose of Expenditure Salary		Category/ Type 001		M M 11	20	2014
	Name of Federal Candidate		Support	Office So	onapt.	House	District: 00
	Ms. Mary L Landrieu		X Oppose		esident	X Senate	State: LA
	Calendar Year-To-Date			Disburse	ment For:	Primary	y General
	Per Election for Office Sought		554635.78	2014	Other (s	specify) ►	Runoff
	(a) SUBTOTAL of Itemized Independent Exp	enditures		▶	-7		81.50
	(b) SUBTOTAL of Unitemized Independent E	Expenditures		.			
	(c) TOTAL Independent Expenditures			·· •		7	
	Under penalty of perjury I certify that the inc	dependent expenditures	s reported herein were	not made	in cooper	ation, consulta	ation, or concert
	with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized					

Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

S

Ms. Emily Buchanan

Signature

	EDULE E (FEC Form 3			
ГЕМІ	ZED INDEPENDENT EXPEN	DITURES		PAGE 166 OF 320 FOR LINE 24 OF FORM 3X
NAME	OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
	nen Speak Out PAC			
				C C00530766
Check	if 24-hour report 48-hour	report New report	ort Amends repo	rt filed on
	Name of Payee Ulia Perry			Date of Public Distribution/Dissemination
	·			11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ma	uiling Address 2046 Perrin St Apt C			Amount
City	у	State	Zip Code	9.00
	reveport	LA	71101	Transaction ID : 3372030e-e32f-4332-a Date of Disbursement or Obligation
	rpose of Expenditure leage		Category/ Type 002	11 20 / Y Y Y Y Y Y
Na	me of Federal Candidate		Support	Office Sought: House District: 00
Ms	s. Mary L Landrieu		Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 Runoff
	II Name of Davis			Curici (specify)
	II Name of Payee Donna S Wilson			Date of Public Distribution/Dissemination
Ма	ailing Address 4456 Country Hill Dr			Amount
Cit	.y	State	Zip Code	20.00
Ва	aton Rouge	LA	70816	Transaction ID : ee4ed106-7956-4511-8 Date of Disbursement or Obligation
	rpose of Expenditure alary		Category/ Type 001	11 20 / 2014
Na	me of Federal Candidate		Support	Office Sought: House District: 00
Ms	s. Mary L Landrieu		Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
(a)	SUBTOTAL of Itemized Independent	Expenditures		29.00
(b)	SUBTOTAL of Unitermized Independent	ent Expenditures		•
(c)	TOTAL Independent Expenditures			· • • • • • • • • • • • • • • • • • • •
with,		any candidate or authorized		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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PAGE 167 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
/ D D / Y D Y D
of Public Distribution/Dissemination
11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
int
7.80
of Disbursement or Obligation
11 20 / Y Y Y Y Y Y Y
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) ▶Runoff
of Public Distribution/Dissemination
11 20 7 2014
ınt
70.00
action ID : 44f1b3fd-76a7-43cb-b of Disbursement or Obligation
11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: House District:00
ent X Senate State: LA
nt For: Primary General
Other (specify) Runoff
77.80

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼				
Women Speak Out PAC		C C00530766		
Check if 24-hour report 48-hour report New report	ort Amends repor	t filed on M M / D D / Y Y Y Y		
Full Name of Payee		Date of Public Distribution/Dissemination		
Donna S Wilson		11 20 / Y Y Y Y Y		
Mailing Address 4456 Country Hill Dr		Amount		
City State	Zip Code	7.80		
Baton Rouge LA	70816	Transaction ID: af04833d-f8d5-4e7b-a Date of Disbursement or Obligation		
Purpose of Expenditure Mileage	Category/ Type 002	11 20 2014		
Name of Federal Candidate	Support	Office Sought: House District: 00		
Ms. Mary L Landrieu	X Oppose	President State: LA		
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:		
Full Name of Payee		Date of Public Distribution/Dissemination		
Christopher L Gilbert		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1		
Mailing Address 55 Lovell Johnson Rd		Amount		
City State	Zip Code	70.00		
Picayune MS	39466	Transaction ID: 44f1b3fd-76a7-43cb-b		
Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 20 2014		
Name of Federal Candidate	Support	Office Sought: House District: 00		
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA		
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures		77.80		
(c) TOTAL Independent Expenditures				
		7 7 7		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.				
Ms. Emily Buchanan [Electroni	cally Filed] Date	05 18 2015		
Signature				

S

Ms. Emily Buchanan

Signature

	E (FEC Form 3			
TEMIZED INDE	EPENDENT EXPEN	DITURES		PAGE 168 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMI	TTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Spe				
				C C00530766
Check if 24-ho	our report 48-hou	r report New report	ort Amends repo	ort filed on
Full Name of F Christopher				Date of Public Distribution/Dissemination
Christophei	L Glibert			11 / 20 / Y Y Y Y Y
Mailing Address	s 55 Lovell Johnson Rd			Amount
City		State	Zip Code	42.60
Picayune		MS	39466	Transaction ID: 4a6dfdd6-cbe0-4bc8-8 Date of Disbursement or Obligation
Purpose of Exp Mileage	penditure		Category/ Type 002	M 11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Feder	ral Candidate		Support	Office Sought: House District: 00
Ms. Mary L Lar	ndrieu		X Oppose	President Senate State: LA
	Year-To-Date on for Office Sought	7	554635.78	Disbursement For:
Full Name of F	Payee			Date of Public Distribution/Dissemination
Elvis Spea	ars			11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Addres	S 2150 Hope St			Amount
City		State	Zip Code	80.00
New Orleans		LA	70119	Transaction ID: 7484d660-8254-47e9-b Date of Disbursement or Obligation
Purpose of Exp Salary	penditure		Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Feder	ral Candidate		Support	Office Sought: House District: 00
Ms. Mary L La	ndrieu		∑ Oppose	President Senate State: LA
Calendar	Year-To-Date			Disbursement For: Primary General
	on for Office Sought		554635.78	2014
(a) SUBTOTAL	of Itemized Independen	t Expenditures		▶ 122.60
(b) SUBTOTAL	of Unitemized Independ	lent Expenditures		·· •
(c) TOTAL Inde	pendent Expenditures			··· >
with, or at the re		any candidate or authorized		e not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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IEI	MIZED INDEPENDENT EXPENDITURES		PAGE 169 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) /omen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
 Che	eck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
T	Full Name of Payee Elvis Spears		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 2150 Hope St		Amount
F	City State	Zip Code	9.60
	New Orleans LA	70119	Transaction ID : a2752ca0-3f34-4e66-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ŀ	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Alice K Salazar		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 605 W Houston St		Amount
ŀ	City State	Zip Code	90.00
-	Marshall TX	75633	Transaction ID : 6d346d4b-d596-4434-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 20 / 2014
ľ	Name of Federal Candidate	Support	Office Sought: House District:00
-	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
((a) SUBTOTAL of Itemized Independent Expenditures		> 99.60
((b) SUBTOTAL of Unitemized Independent Expenditures		- >
(0	(c) TOTAL Independent Expenditures		•
W	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	
	Ms. Emily Buchanan [Electronic	ically Filed] Date	9 05 18 2015
	Signature	_ Date	

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES	PAGE 170 OF 320
	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼
Women Speak Out FAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Alice K Salazar	Date of Public Distribution/Dissemination
Mailing Address 605 W Houston St	11 20 2014 Amount
City State 7in Code	51.60
City State Zip Code Marshall TX 75633	Transaction ID : df425a9f-8469-4a5b-8
Purpose of Expenditure Mileage Category/ Type 002	Date of Disbursement or Obligation 11 20 2014
Name of Federal Candidate Support Office	A Sought: House District: 00
Ms. Many I Landrieu	President
	rsement For: Primary General
Full Name of Payee Ana L Esquivel	Date of Public Distribution/Dissemination
Mailing Address 284 Cr 1401	Amount
City State Zip Code	100.00
Carthage TX 75633	Transaction ID: 4e8cb6eb-0bc1-4abb-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbu 2014	rrsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	151.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan	M / D D / Y Y Y

[Electronically Filed]

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Date

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S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)				
EMIZED INDEPENDENT EXPENDITURES				PAGE 171 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
heck if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Ana L Esquivel				of Public Distribution/Dissemination
Mailing Address 284 Cr 1401			Amou	11 20 2014 unt
3	<u> </u>	T Octo		60.00
'	State TX	Zip Code 75633		69.00 action ID: 52de2189-dd17-4682-9 of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 20 2014
Name of Federal Candidate		Support	Office Sough	ht: House District:00
Ms. Mary L Landrieu		X Oppose	Presid	dent State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For:
Full Name of Payee			Date	of Public Distribution/Dissemination
Jennifer F Gilbert				11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 180 McNeil Steep Hollow Rd			Amou	unt
City	State	Zip Code		77.50
	MS	39426		action ID : b1eec914-7e65-4bcf-b of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	$\exists \mid C$	11 20 7 2014
Name of Federal Candidate		Support	Office Sough	ht: House District: 00
Ms. Mary L Landrieu		X Oppose	Presid	dent State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures				146.50
(4)				4 4
(b) SUBTOTAL of Unitemized Independent Expenditure	∋s		•	7
(c) TOTAL Independent Expenditures			· [7 7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			

[Electronically Filed]

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Date

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PAGE 172 OF 320 FOR LINE 24 OF FORM 3X

	TOTT LINE 24 OF TOTAL 3X			
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼				
Women Speak Out PAC	C C00530766			
Check if 24-hour report 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y			
Full Name of Payee	Date of Public Distribution/Dissemination			
Jennifer F Gilbert	11 20 / Y Y Y Y			
Mailing Address 180 McNeil Steep Hollow Rd	Amount			
City State Zip Code	41.70			
Carriere MS 39426	Transaction ID : ca3d5398-8afb-4874-9 Date of Disbursement or Obligation			
Purpose of Expenditure Mileage Category/ Type 002	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	ce Sought: House District:00			
Ms. Mary L Landrieu Oppose	President X Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought Disk 2014	oursement For: Primary General W Other (specify) ► Runoff			
Full Name of Payee	Date of Public Distribution/Dissemination			
Hilary Townsend	11 20 2014			
Mailing Address 4506 US Hwy 79 North	Amount			
City State Zip Code	100.00			
Deberry TX 75639	Transaction ID : 64d754d2-2005-4ab2-9 Date of Disbursement or Obligation			
Purpose of Expenditure Salary Category/ Type 001	11 20 7 2014			
Name of Federal Candidate Support Office	ce Sought: House District: 00			
Ms. Mary L Landrieu Oppose	President State: LA			
Calendar Year-To-Date Per Election for Office Sought Dist 201	bursement For: Primary General Other (specify) Runoff			
(a) SUBTOTAL of Itemized Independent Expenditures	141.70			
4) OUDTOTAL (11 %) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(c) TOTAL Independent Expenditures	7 7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.				
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015			
Signature				

TI	EMIZED INDEPENDENT EXPEND	DITURES			PAGE 173 OF 320 FOR LINE 24 OF FORM 3X
	IAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
۷	Women Speak Out PAC			С	C00530766
Cł	check if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
	Full Name of Payee			Date of Pu	blic Distribution/Dissemination
	Evelyn Lesaicherre			M = M 11	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 629 Radiance Ave			Amount	
	City	State	Zip Code	— L	80.00
	Metairie	LA	70001		ID: 7db41675-e3ef-44e0-8 sbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	11 11	20 / 2014
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		Oppose	President	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For 2014 \times Other (
	Full Name of Payee Evelyn Lesaicherre				ublic Distribution/Dissemination
	Mailing Address 629 Radiance Ave			Amount	
	City	State	Zip Code		5.10
	Metairie	LA	70001		n ID : e3c615c8-a9fe-46a6-b sbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	M 11	
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For 2014 Other	r: Primary General (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent	Expenditures		>	85.10
	(b) SUBTOTAL of Unitemized Independe	ent Expenditures		· •	7
	(c) TOTAL Independent Expenditures			•	7
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Ms. Emily Buchanan	[Electron	ically Filed] Date	05 40	8 2015
	Signature		_ Date	,	, 20.0

PAGE		OF	0_0
FOR L	INE 24	OF	FORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Taylor De Julian-Hernandez Mailing Address 384 Cr 1401	11 20 7 2014
284 Cr 1401	Amount
City State Zip Code	100.00
Carthage TX 75633	Transaction ID : 959c28bc-69bd-421c-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disl 201	bursement For: Primary General V Other (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Taylor De Julian-Hernandez	Date of Public Distribution/Dissernination
Mailing Address 284 Cr 1401	Amount
City State Zip Code	49.50
Carthage TX 75633	Transaction ID : d355b3f8-e97e-4479-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 20 2014
Name of Federal Candidate Support Offi	ice Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Dis 201	bursement For: Primary General Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	149.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) 555.617E of Officialized Independent Experiations	7 7 7
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

•	15951393284				
	DULE E (FEC Form 3X) ED INDEPENDENT EXPENDITURES				PAGE 175 OF 320
					FOR LINE 24 OF FORM 3X
	OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Wom	en Speak Out PAC				C C00530766
					M = M / D = D / Y = Y = Y
Check if		New repo	ort Amends repo	ort filed o	on
	Name of Payee chael Vidrine				Date of Public Distribution/Dissemination
Maili	ing Address 1103 West Wilson Street				11 20 2014
					Amount
City	State		Zip Code		60.00
	Platte LA		70586		ransaction ID: 9de1da1d-d9e7-4e1c-b Date of Disbursement or Obligation
Purp Sala	pose of Expenditure ary		Category/ Type 001		11 20 / 2014
Nam	ne of Federal Candidate		Support	Office	Sought: House District: 00
Ms.	Mary L Landrieu		X Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought	7	554635.78	2014	Sement For: Primary General Other (specify) ► Runoff
	Name of Payee ichael Vidrine				Date of Public Distribution/Dissemination
	ling Address				11 20 2014
Iviaii	1103 West Wilson Street				Amount
City	State		Zip Code		34.80
Ville	e Platte LA		70586		ransaction ID: 67938b65-a6ba-406f-b Date of Disbursement or Obligation
	pose of Expenditure eage		Category/ Type 002		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Nam	ne of Federal Candidate				Sought: House District: 00
	Mary L Landrieu		Support Oppose		Sought: House District: 00 President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	-,	554635.78	2017	sement For: Primary General
(a) S	SUBTOTAL of Itemized Independent Expenditures			• •	94.80
(b) S	UBTOTAL of Unitemized Independent Expenditures				
(c) T	OTAL Independent Expenditures			. •	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 /	18	/	2015
Signature						
0.9						

PAGE 176 OF 320 FOR LINE 24 OF FORM 3X						
FEC IDENTIFICATION NUMBER ▼ C C00530766						
M / D D / Y Y Y Y Y						
f Public Distribution/Dissemination						
11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
t						
10.00						
tion ID: cef5b467-9192-4070-9 f Disbursement or Obligation						
11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
: House District: 00						
nt X Senate State: LA						
For: Primary General						
her (specify) ▶Runoff						
f Public Distribution/Dissemination						
11 20 / Y Y Y Y Y						
nt						
45.00 ction ID : f092e9e8-7f12-4d35-8						
f Dishurasment or Obligation						

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼						
Wo	Women Speak Out PAC					
				0 300330700		
Chec	k if 24-hour report 48-hour report New report	ort Amends repo	rt filed or	n M = M / D = D / Y = Y = Y		
Ţ	full Name of Payee			Date of Public Distribution/Dissemination		
	Cynthia N Schmit			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
N	Mailing Address 2226 Taft Circle Apt 1		4	Amount		
	Dity State	Zip Code		10.00		
- 1	Vinchester VA	22601		ansaction ID : cef5b467-9192-4070-9 Date of Disbursement or Obligation		
	Purpose of Expenditure Salary	Category/ Type 001		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
1	lame of Federal Candidate	Support	Office S	Sought: House District: 00		
١	Ms. Mary L Landrieu	X Oppose		resident X Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014 _	ement For: Primary General		
L	Per Election for Office Sought	00.0000		Other (specify) ►Runoff		
	Full Name of Payee Jeanne Tribou		[Date of Public Distribution/Dissemination		
				11 20 2014		
	Mailing Address 22369 Ponderosa Dr.		A	Amount		
	Dity State	Zip Code		45.00		
	Mandeville LA	70471		ransaction ID: f092e9e8-7f12-4d35-8 Date of Disbursement or Obligation		
	Purpose of Expenditure Salary	Category/ Type 001		11 20 / 2014		
	Name of Federal Candidate	Support	Office S	Sought: House District: 00		
	Ms. Mary L Landrieu	X Oppose		resident State: LA		
l	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ement For: Primary General		
	To Election of Congress		/	X Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures		• [55.00		
(b) SUBTOTAL of Unitemized Independent Expenditures		. [
			, r	7 7		
(с) TOTAL Independent Expenditures		•	7 1 7 1 7		
wi	nder penalty of perjury I certify that the independent expenditures th, or at the request or suggestion of, any candidate or authorized rty committee) any political party committee or its agent.					
	Ms. Emily Buchanan [Electroni	cally Filed]	05	/ DDD / YDY YDY YD Y D Y D Y D Y D Y D Y		
	Signature	Date	30			
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	C 00530	-	N NUM	IBER ▼	

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NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed on	n
Full Name of Payee			D	Date of Public Distribution/Dissemination
Jeanne Tribou				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 22369 Ponderosa Dr.			A	Amount
City	State	Zip Code	— r	4.80
Mandeville	LA	70471		ransaction ID: a782dcde-c4f3-4864-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office S	Sought: House District: 00
Ms. Mary L Landrieu		Support Oppose		resident X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	2014 _	ement For: Primary General
Tel Election for Chiec Godgitt	, , ,	1 1 /6 1		Other (specify) ► Runoff
Full Name of Payee Jessica R Resendiz				Date of Public Distribution/Dissemination
Mailing Address				11 20 2014
9685 Paula St				Amount
City	State	Zip Code		90.00
Keithville	LA	71047	I	ransaction ID : 61318819-d5ce-49ba-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office S	Sought: House District: 00
Ms. Mary L Landrieu		Oppose		President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburse 2014	ement For: Primary General
Tot Election for Office Cought	7	110		Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent E	xpenditures			94.80
(b) SUBTOTAL of Unitemized Independen	t Expenditures			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorized	•		·
Ms. Emily Buchanan	[Flactroni	ically Filed]	M	/ D D / Y Y Y Y
Signature	[Electroni	Date	05	18 2015
Oig. idid. o				

PAGE			OF		320	
FOR I	INE	24	OF	FO	RM	ЗХ

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	t Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Jessica R Resendiz		Date of Public Distribution/Dissemination
Mailing Address 9685 Paula St		11 20 2014 Amount
	ip Code	27.90
Keithville LA 7	71047	Transaction ID: 08276204-be8e-4a97-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 20 / 2014
Name of Federal Candidate	Support Office	e Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date		ursement For: Primary General
	554635.78 2014	X Other (specify) ► Runoff
Full Name of Payee Sheri J Peace		Date of Public Distribution/Dissemination
		11 20 2014
Mailing Address 9685 Paula St		Amount
City State Z	ip Code	100.00
Keithville LA 7	71047	Transaction ID: d7342391-18b7-4d69-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 20 / 2014
Name of Federal Candidate	Support Office	e Sought: House District:00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disbut 2014	ursement For: Primary General Nother (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	>	127.90
(b) SUBTOTAL of Unitemized Independent Expenditures		
· · · · · · · · · · · · · · · · · · ·		4 4
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronica	ally Filed] Date 0	5 18 2015
Signature		

S

Ms. Emily Buchanan

Signature

	OULE E (FEC Form 3						
TEMIZE	D INDEPENDENT EXPEN	DITURES				PAGE 179 FOR LINE 2	OF 320 4 OF FORM 3X
	F COMMITTEE (In Full)				FEC II		ON NUMBER ▼
Wome	en Speak Out PAC				С	C00530766	
Check if	24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y I Y I Y I Y
	Name of Payee eri J Peace			Date	of Publi	ic Distribution/	Dissemination
Mailir	ng Address 9685 Paula St			Amo	11 ount	20	2014
City		State	Zip Code				50.40
Keith	ville	LA	71047			D: 667ed2c1- ursement or C	1e9d-4294-b
Purpo Milea	ose of Expenditure age		Category/ Type 002		M M M	20	2014
Name	e of Federal Candidate		Support	Office Sou	ght:	House	District:00
Ms. N	Mary L Landrieu		X Oppose	Presi	dent	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014		Primary pecify) ▶	General Runoff
Ch	Name of Payee ristopher Marquess ng Address 110 W Pecan St			Date	M M M 11	ic Distribution/	Dissemination 2014
					Juni		
City Ville	Platte	State LA	Zip Code 70586			D: 56cc5a69-	
Purpo	ose of Expenditure ry		Category/ Type 001		M M M 11	20	2014
Name	e of Federal Candidate		Support	Office Sou	ght:	House	District:00
Ms. I	Mary L Landrieu		Oppose	Presi	dent	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014		Primary	General Runoff
(a) SU	JBTOTAL of Itemized Independent	Expenditures		· [1 1 7	100.40
(b) SU	JBTOTAL of Unitemized Independ	ent Expenditures					
(c) TO	OTAL Independent Expenditures			•	- 7	7	
with, o	penalty of perjury I certify that the rat the request or suggestion of, committee) any political party com	any candidate or authorized					

[Electronically Filed]

05

Date

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	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 180 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	oort Amends repo	rt filed on
	Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
	Mailing Address 110 W Pecan St		Amount 20 2014
	City State	Zip Code	36.00
	Ville Platte LA	70586	Transaction ID : ccaf0ad5-b6a3-42b3-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 / Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Philip Elkins		Date of Public Distribution/Dissemination 11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 227 Lincoln Dr		Amount
	City State	Zip Code	40.00
	Bossier City LA	71111	Transaction ID: 8137d947-be35-4dfe-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		76.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

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Date

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NAME OF COMMITTEE (In Full)

PAGE 181 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M
of Public Distribution/Dissemination
11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt
7.53
oction ID : a1629bef-8396-4579-a of Disbursement or Obligation
11 20 7 2014
nt: House District: 00
ent Senate State: LA
nt For: Primary General
other (specify) ► Runoff
of Public Distribution/Dissemination
11 20 7 2014
ınt
95.00
oction ID: 9d35985c-d858-43a0-a of Disbursement or Obligation
11 20 7 2014
nt: District: 00
ent Senate State: LA
nt For: Primary General
Other (specify) Runoff
102.53

Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y
Full Name of Payee Philip Elkins	Date of Public Distribution/Dissemination 11 20 2014
Mailing Address 227 Lincoln Dr	Amount
City State Zip Code	7.53
Bossier City LA 71111	Transaction ID : a1629bef-8396-4579-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 20 / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General Nother (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Francesca Blom	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 101 Asbury Ct	Amount
City State Zip Code	95.00
Winchester VA 22602	Transaction ID: 9d35985c-d858-43a0-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 20 / 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	102.53
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	11711711
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Signature

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 182 OF 320
			FOR LINE 24 OF FORM 3X
	NME OF COMMITTEE (In Full) Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
v	vomen opeak out i Ao		C C00530766
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repor	t filed on
	Full Name of Payee Darius Beverly		Date of Public Distribution/Dissemination
	Mailing Address 157 Bishop Drive		11
	City State	Zip Code	55.00
	Avondale LA	70094	Transaction ID : 611618ae-9714-4df2-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 20 / Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Ms. Dinah Beverly		Date of Public Distribution/Dissemination
	Mailing Address 157 Bishop Drive		Amount
	City State	Zip Code	55.00
	Avondale LA	70064	Transaction ID: d05aa67d-94c6-4487-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		110.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDI	TURES		PAGE 183 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour re	port New rep	ort Amends repo	ort filed on
Full Name of Payee Ms. Dinah Beverly			Date of Public Distribution/Dissemination
Mailing Address			11 20 / Y Y Y Y Y 1
157 Bishop Drive			Amount
City	State	Zip Code	4.80
Avondale	LA	70064	Transaction ID : 941bbab8-b9ac-4ddf-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 20 / Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
Full Name of Payee			Date of Public Distribution/Dissemination
Carl Brent			11 20 7 2014
Mailing Address 6718 Lake Willow Dr			Amount
City	State	Zip Code	80.00
New Orleans	LA	70126	Transaction ID: 8e81fe68-33ca-42f4-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 20 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		∑ Oppose	
		∑ Oppose	President State.
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 Runoff Runoff
(a) SUBTOTAL of Itemized Independent Ex	rpenditures		▶ 84.80
(b) SUBTOTAL of Unitemized Independent	Expenditures		•
(c) TOTAL Independent Expenditures			•
	y candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

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Date

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	PAGE	184	OF		
	FOR L	INE 24	OF FO	ORM 3X	
С	DENTIFICATION NUMBER ▼				

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on
Full Name of Payee	Date of Public Distribution/Dissemination
Carl Brent	11 20 / Y Y Y Y Y Y
Mailing Address 6718 Lake Willow Dr	Amount
City State Zip Code	14.10
New Orleans LA 70126	Transaction ID : d28ebd69-a2fa-4263-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 20 / 2014
Name of Federal Candidate Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify) Runoff
Full Name of Payee Cynthia J Christmas Mailing Address 4734 Freedman St	Date of Public Distribution/Dissemination 11 20 2014
1731 Frenchmen St	Amount
City State Zip Code	60.00
New Orleans LA 70116	Transaction ID: a0f7ea54-1153-47eb-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 20 2014
Name of Federal Candidate Support Office	ce Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb. 201-	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	74.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1171171
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

SCHEDULE E (FEC ITEMIZED INDEPENDENT

	TURES		PAGE 185 OF FOR LINE 24 OF FOI	320 RM 32
ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMB	ER ▼
omen Speak Out PAC			C C00530766	Ξ
eck if 24-hour report 48-hour re	eport New	report Amends repor	t filed on Y Y Y	/
Full Name of Payee			Date of Public Distribution/Dissemina	tion
Cynthia J Christmas			11 20 2014	
Mailing Address 1731 Frenchmen St			Amount	
City	State	Zip Code	9	00
New Orleans	LA	70116	Transaction ID : 7ecb0e49-6f5f-45d1- Date of Disbursement or Obligation	
Purpose of Expenditure Mileage		Category/ Type 002	11 20 / 2014	Y Y
Name of Federal Candidate		Support	Office Sought: House District: _	00
Ms. Mary L Landrieu		X Oppose	President X Senate State: _	LA
Calendar Year-To-Date Per Election for Office Sought	1 1 9 1 1		Disbursement For:	eneral
Full Name of Payee	-		Date of Public Distribution/Dissemina	ition
Joshua J Huffman			M M / D D / Y Y 11 20 201	
Mailing Address 211 Dixie Ave				
Mailing Address	State	Zip Code	11 20 201	1
Mailing Address 211 Dixie Ave	State VA	Zip Code 22801	11 20 201	50
Mailing Address 211 Dixie Ave City		·	Amount 67. Transaction ID: 76902696-e37f-466b Date of Disbursement or Obligation	50 -9
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure		22801	Amount 67. Transaction ID: 76902696-e37f-466b Date of Disbursement or Obligation	50 -9
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure Salary		22801 Category/ Type 001	Amount 67. Transaction ID: 76902696-e37f-466b Date of Disbursement or Obligation 11 20 201 47 201	50 -9
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure Salary		22801	Amount Transaction ID : 76902696-e37f- Date of Disbursement or Obliga	67. 466b
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought	VA	Category/ Type 001 Support Oppose 554635.78	Amount 67. Transaction ID : 76902696-e37f-466b Date of Disbursement or Obligation M 11	50 -9 4 00 LA
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent E	vA	Category/ Type 001 Support Oppose 554635.78	Amount 67. Transaction ID : 76902696-e37f-466b Date of Disbursement or Obligation M 11	50 -9 Y 4 00 LA
Mailing Address 211 Dixie Ave City Harrisonburg Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought	vA	Category/ Type 001 Support Oppose 554635.78	Amount 67. Transaction ID : 76902696-e37f-466b Date of Disbursement or Obligation M 11	50 -9 4 00 LA

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					
Signature					

	MIZED INDEPENDENT EXPENDITURES		PAGE 186 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Omen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766
Che	ck if 24-hour report 48-hour report New repo	ort Amends repo	ort filed on M = M / D = D / Y = Y = Y
T	Full Name of Payee Michael B Fuhrmann		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 329 Columbia St		Amount
	City State	Zip Code	25.00
;	Shreveport LA	71104	Transaction ID : f83e03fb-54f7-4d4c-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	∑ Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Michael B Fuhrmann		Date of Public Distribution/Dissemination 11 20 2014
	Mailing Address 329 Columbia St		Amount
	City State	Zip Code	1.80
	Shreveport LA	71104	Transaction ID: 8765334e-742b-44cf-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
(a	a) SUBTOTAL of Itemized Independent Expenditures		▶ 26.80
(k	b) SUBTOTAL of Unitemized Independent Expenditures		- >
(0	c) TOTAL Independent Expenditures		•
W	Inder penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.	•	
	Ms. Emily Buchanan [Electronia	ically Filed] Date	05 18 2015
	Signature		

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 187 OF 320
	IMIZED INDEPENDENT EXPENDITURES		PAGE 187 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
V	vomen Speak Out FAC		C C00530766
Cł	eck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee Christine Stevens		Date of Public Distribution/Dissemination
	Mailing Address		11 20 / 2014
	100 Asbury Ct		Amount
	City State Winchester VA	Zip Code 22602	70.00 Transaction ID : 470c22b1-ff1a-46b4-b
			Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Jazmine d Conner Mailing Address 100 ASBURY CT		Date of Public Distribution/Dissemination M M M / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	70.00
	WINCHESTER VA	22602	Transaction ID : 57db3c9d-45a0-4bc2-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 140.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
			7 7 7
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 188 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	port Amends repo	ort filed on
	Full Name of Payee Jon E Conner		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		11 20 2014 Amount
	City State Winchester VA	Zip Code 22602	70.00 Transaction ID: 486e83d4-fab2-4521-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Rodney O Culbreath Mailing Address 100 Asbury Ct		Date of Public Distribution/Dissemination M M M / 20 / Y Y Y Y Y Amount
	City State	Zip Code	70.00
	Winchester VA	22602	Transaction ID : 39c9d76b-15ba-4104-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 20 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		140.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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MIZED INDEPENDENT EXPENDITUR	RES		PAGE 189 OF 320 FOR LINE 24 OF FORM 3
E OF COMMITTEE (In Full)			
omen Speak Out PAC			FEC IDENTIFICATION NUMBER
			C C00530766
ck if 24-hour report 48-hour report	New	report Amends repo	ort filed on
Full Name of Payee Rodney D Culbreth			Date of Public Distribution/Dissemination
Mailing Address 100 Asbury CT			
3200 Dam Neck Rd			Amount
City	State	Zip Code	70.00
Vinchester	VA	22602	Transaction ID : 2c1fd8b3-6f44-4fe4-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General Primary General Support Support General Support Support General Support General General General General General General General General General General General General General General General General General General General General General General General General General General General General General General
Rze Culbreath Mailing Address 100 Asbury Ct			11 / 20 / 2014 Amount
City	State	Zip Code	70.00
Winchester	VA	22602	Transaction ID: 12d8d64c-7fe0-4450-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / 20 / Y Y Y Z
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary Gener 2014
) SUBTOTAL of Itemized Independent Expen	ditures		140.00
) SUBTOTAL of Unitemized Independent Exp	enditures		
) TOTAL Independent Expenditures			

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Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	/ 18	2015
Signature					

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
П	EMIZED INDEPENDENT EXPENDITURES		PAGE 190 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination
	Mailing Address 121 Ohara Dr		11 20 2014 Amount
	City State Salisbury NC	Zip Code 28147	94.00 Transaction ID : 8142c977-b831-4e6b-b
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation 11 20 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Colton R Overcash Mailing Address 121 Ohara Dr		Date of Public Distribution/Dissemination M M M / 20 / Y Y Y Y Y Amount
	City State	Zip Code	68.40
	Salisbury	28147	Transaction ID: 968964d3-0b6c-4f4d-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 20 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 162.40
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Date

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Signature

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	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 191 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Jerome M Weil		Date of Public Distribution/Dissemination
	Mailing Address 101 Durham Drive		11 21 2014 Amount
	City State	Zip Code	35.00
	Lafayette LA	70508	Transaction ID : 1c74a8f6-33e5-4080-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 21 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Jerome M Weil		Date of Public Distribution/Dissemination
	Mailing Address 101 Durham Drive		Amount
	City State	Zip Code	9.00
	Lafayette LA	70508	Transaction ID : 2cfcb891-2784-4a40-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 21 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		44.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)	
EMIZED INDEPENDENT EXPENDITURES	PAGE 192 OF 320 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	
Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼
	C C00530766
check if 24-hour report 48-hour report New report Amends report	t filed on
Full Name of Payee Joshua J Huffman	Date of Public Distribution/Dissemination
Mailing Address	11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
211 Dixie Ave	Amount
City State Zip Code	45.00
Harrisonburg VA 22801	Transaction ID: 9179bd8d-46bc-4e62-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Laura U Logie	11 21 2014
Mailing Address 2565 Shire Circle	Amount
City State Zip Code	30.00
Harrisonburg VA 22801	Transaction ID: e86f2e2c-832b-467e-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu	President Senate State: LA
Calcillati Total To Bato	Disbursement For: Primary General
Per Election for Office Sought 554635.78	2014
(a) SUBTOTAL of Itemized Independent Expenditures	75.00
(b) SUBTOTAL of Unitemized Independent Expenditures)
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	•

[Electronically Filed]

05

Date

18

Check if

City

Shreveport

NAME OF COMMITTEE (In Full) Women Speak Out PAC

Full Name of Payee

Mailing Address

Maegan E McDaniel

24-hour report

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

3009 Skelly St

48-hour report

PAGE 193 OF 320			
FOR LINE 24 OF FORM 3X			
FEC IDENTIFICATION NUMBER ▼ C C00530766			
on M = M / D = D / Y = Y = Y = Y			
Date of Public Distribution/Dissemination			
11 / 21 / 2014			
Amount			
30.00			
Transaction ID: 740eb62c-565a-4e8d-9 Date of Disbursement or Obligation			
11 21 2014			
Sought: House District: 00			
President State: LA			
rsement For: Primary General			
X Other (specify) ► Runoff			
Date of Public Distribution/Dissemination			
Date of Public Distribution/Dissemination			
Date of Public Distribution/Dissemination 11 21 2014			
M M / D D / Y Y Y Y			
M 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Amount 4.80 Transaction ID : 4bfd5387-4506-428d-b			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation			
Amount 4.80 Transaction ID : 4bfd5387-4506-428d-b			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation 11 21 2014			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation 11			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M / P 21 / 2014 Sought: House District: 00 President Senate State: LA rsement For: Primary General Other (specify) Runoff			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M M / 21 / 2014 Sought: House District: 00 President Senate State: LA rsement For: Primary General			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M / P 21 / 2014 Sought: House District: 00 President Senate State: LA rsement For: Primary General Other (specify) Runoff			
Amount 4.80 Transaction ID: 4bfd5387-4506-428d-b Date of Disbursement or Obligation M M / P 21 / 2014 Sought: House District: 00 President Senate State: LA rsement For: Primary General Other (specify) Runoff			

Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Preside Disbursemen Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Maegan E McDaniel Mailing Address 3009 Skelly St Amou City State Zip Code Shreveport LA 71107 Transa Date Purpose of Expenditure Category/ 002 Mileage Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature FEC Schedule E (Form 3X) Rev. 09/2013

Amends report filed on

New report

Zip Code

71107

State

LA

TEMIZED INDEPENDENT EXPENDI	TURES			PAGE 194 FOR LINE 2	OF 320 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION	ON NUMBER ▼
Women Speak Out PAC				C C00530766	
Check if 24-hour report 48-hour re	eport New repo	ort Amends repo		M = M / D = D /	Y Y Y Y Y
Full Name of Payee Bobbie M Steinsholt				of Public Distribution	/Dissemination
Mailing Address 3009 Skelly St			L	11 21	2014
JUUJ JAGIIY JA			Amou	ınt	
City	State	Zip Code	─ │ ┃.		30.00
Shreveport	LA	71107		action ID: 16ba14fa-2 of Disbursement or C	
Purpose of Expenditure Salary		Category/ Type 001		11 21	2014
Name of Federal Candidate		Support	Office Sough	ht: House	District: 00
Ms. Mary L Landrieu		X Oppose	Presid		State: LA
Calendar Year-To-Date Per Election for Office Sought	7 7	554635.78	Disbursemer 2014	nt For: Primary	General Runoff
Full Name of Payee Amanda Boley				of Public Distribution	/Dissemination 2014
Mailing Address Split Oak Drive			Amou		
2"	01-1-				25.00
City charlotte	State NC	Zip Code 28227		action ID : 715ff4bd-0 of Disbursement or 0	
Purpose of Expenditure Salary		Category/ Type 001		11 21	2014
Name of Federal Candidate		Support	Office Sough	ht: House	District:00
Ms. Mary L Landrieu		X Oppose	Presid		State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For: Primary Other (specify) ▶	General Runoff
(a) SUBTOTAL of Itemized Independent Ex	xpenditures		· [7 7	65.00
(b) SUBTOTAL of Unitemized Independent	Expenditures				
Committee of the second state of the second st			-		
(c) TOTAL Independent Expenditures			>	7- 1-7-	
Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committee	y candidate or authorized				
Ms. Emily Buchanan	[Electron	ically Filed]		18 / 201	Y Y
Signature		Date	, 05	10 201	3

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		_	
TΕ	EMIZED INDEPENDENT EXPENDITURES		L	PAGE 195 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC		C	000530766
Ch	neck if 24-hour report 48-hour report New report	Amends repor	t filed on	D D / Y H Y H Y
	Full Name of Payee Amanda Boley		Date of Public	Distribution/Dissemination
	Mailing Address Split Oak Drive		11	21 2014
	Spin Can Find		Amount	
	City State Zip	Code		18.00
		227		: 7d6b61f4-6f97-4ac3-a rsement or Obligation
	Purpose of Expenditure Mileage Ca	ategory/ Type 002	11 /	21 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu	X Oppose	President X	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 55	54635.78	Disbursement For: 2014	Primary General ecify) ► Runoff
	Full Name of Payee	<u>'</u>		Distribution/Dissemination
	Virginia T Grant		11	21 / 2014
	Mailing Address 134 Shore Crest Circle		Amount	
	City State Zip	Code		40.00
		426		: 9b90fa3b-44e9-4ac2-9 rsement or Obligation
	Purpose of Expenditure Salary Ca	ategory/ Type 001	11 /	21 / 2014
	Name of Federal Candidate	Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu	X Oppose		Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 5	554635.78	Disbursement For: 2014 Other (spe	Primary General ecify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		>	58.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		>	
	(c) TOTAL Independent Expenditures		•	
	Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized con party committee) any political party committee or its agent.			

[Electronically Filed]

05

Date

18

NAME OF COMMITTEE (In Full)

PAGE 196 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M / D D / Y T Y T Y
of Public Distribution/Dissemination
11 21 7 2014
nt
7.50
ction ID : 5a002577-d3b1-4ac5-8 of Disbursement or Obligation
11 21 7 2014
t: House District: 00
ent Senate State: LA
t For: Primary General
ther (specify) ▶Runoff
of Public Distribution/Dissemination
11 21 2014
nt
40.00 ction ID: 1847a2d8-73e8-42c4-8 of Disbursement or Obligation
11 D 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
t: House District: 00
. 🔽

Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
Full Name of Payee Virginia T Grant		Date of Public Distribution/Dissemination
Mailing Address 134 Shore Crest Circle		Amount
City State Carrire MS	Zip Code 39426	7.50 Transaction ID : 5a002577-d3b1-4ac5-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 21 / 2014
Name of Federal Candidate Ms. Mary L Landrieu Colondar Vege To Date	Support Oppose	Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	554635.78	2014
Full Name of Payee Virginia T Grant Mailing Address 134 Shore Crest Circle		Date of Public Distribution/Dissemination 11 21 / 2014 Amount
City State Carrire MS	Zip Code 39426	40.00 Transaction ID : 1847a2d8-73e8-42c4-8
Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Ms. Mary L Landrieu	Support Oppose	Office Sought: House District: 00 President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		47.50
(b) SUBTOTAL of Unitemized Independent Expenditures		·
(c) TOTAL Independent Expenditures		>
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electroni	ically Filed] Date	05 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	_	

PAGE		OF	
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Virginia T Grant	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 134 Shore Crest Circle	Amount
City State Zip Code	7.50
Carrire MS 39426	Transaction ID: 3bec30d7-c6c2-4ee3-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	fice Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Dis 20	sbursement For: Primary General 14
Full Name of Payee	
Tammay Williams	Date of Public Distribution/Dissemination 11 21 2014
Mailing Address 924 N. Prieur St	Amount
City State Zip Code	80.00
New Orleans LA 70116	Transaction ID: 711c5bbe-4f04-4b5a-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 21 2014
Name of Federal Candidate Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu Oppose	President State: LA
	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	87.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

PAGE 198 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
= M / D = D / Y = Y = Y
of Public Distribution/Dissemination
11 21 2014
nt
18.00
ction ID : dd4ff20c-5633-4138-b of Disbursement or Obligation
11 / 21 / 2014
t: House District: 00
ent X Senate State: LA
t For: Primary General
other (specify) ►Runoff
of Public Distribution/Dissemination
11 21 2014
int
40.00 action ID: 87c1c563-a0db-41bf-8 of Disbursement or Obligation
11 21 2014
nt: House District:00
ent Senate State: LA
nt For: Primary General
Other (specify) P Runoff
58.00
58.00

Momon Speak Out DAC		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Tammay Williams		11 21 2014
Mailing Address 924 N. Prieur St		Amount
City State Zip	p Code	18.00
New Orleans LA 70	0116	Transaction ID : dd4ff20c-5633-4138-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 D D / Y Y Y Y Y Y 2014
Name of Federal Candidate	Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	Disk 201	bursement For:
Full Name of Payee Beau Autin	<u>'</u>	Date of Public Distribution/Dissemination
Beau Autili		11 21 2014
Mailing Address 345 Auroura Ave		Amount
City State Zi	p Code	40.00
Metairie LA 70	0006	Transaction ID: 87c1c563-a0db-41bf-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ce Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disl 201	bursement For: Primary General A
(a) SUBTOTAL of Itemized Independent Expenditures		58.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures required with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronical	lly Filed] □	05 18 2015
Signature	Date	

Signature

	CHEDULE E (FEC FORM 3X)		
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 199 OF 320 FOR LINE 24 OF FORM 3X
V/	IAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Women Speak Out PAC		C C00530766
_ Cł	Check if 24-hour report 48-hour report New report	port Amends repor	ort filed on
_	Full Name of Payee		Date of Public Distribution/Dissemination
	Beau Autin		11 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 345 Auroura Ave		Amount
	City State	Zip Code	1.86
	Metairie LA	70006	Transaction ID : dde5d4b0-2b43-4426-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Antoinette Franklin		Date of Public Distribution/Dissemination
	Mailing Address 8822 Apple St		11 21 2014 Amount
	City State	Zip Code	60.00
	New Orleans LA	70188	Transaction ID : e5647dcd-054c-449c-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 21 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
_	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 61.86
	(b) SUBTOTAL of Unitemized Independent Expenditures		- •
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y Y

[Electronically Filed]

05

Date

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	PAGE FOR LI	200 NE 24	OF OF FO	320 DRM 3X	
f					_
D	ENTIFIC	IOITAC	NUM P	BER ▼	
	ENTIFIC 2005307	-	MUM P	BER ▼	

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends	report filed on M / D D / Y Y Y Y Y
Full Name of Payee Antoinette Franklin	Date of Public Distribution/Dissemination
Mailing Address	11 21 / 2014
8822 Apple St	Amount
City State Zip Code	13.50
New Orleans LA 70188	Transaction ID: 1aa68943-ab09-401d-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	002 11 / 21 / 2014
Name of Federal Candidate Suppo	ort Office Sought: House District: 00
Ms. Mary L Landrieu Oppos	Se President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014
Full Name of Davis	Cuter (speerly)
Full Name of Payee Sheri J Peace	Date of Public Distribution/Dissemination 11 21 2014
Mailing Address 9685 Paula St	Amount
City State Zip Code	40.00
Keithville LA 71047	Transaction ID: a5a26756-c1ea-462c-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 11 21 2014
Name of Federal Candidate Suppo	ort Office Sought: House District: 00
Ms. Mary L Landrieu Oppos	
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	53.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······· >
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or agaparty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	Date 05 18 2015
Signature	

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)					
ΓI	EMIZED INDEPENDENT EXPENDIT	URES			PAGE 2	201 OF 320 IE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)					ATION NUMBER ▼
۷	Vomen Speak Out PAC				C C0053076	36
Cł	neck if 24-hour report 48-hour rep	port New repo	ort Amends repo		1 = M / D = D	/ Y = Y = Y = Y
	Full Name of Payee Sheri J Peace				of Public Distribu	tion/Dissemination
	Mailing Address 9685 Paula St			L	11 21	2014
	3335 44.4 51			Amou	ınt	
	City Keithville	State LA	Zip Code 71047	Transa	action ID : b5485e	27.60 27c-298h-4167-a
			11041		of Disbursement	
	Purpose of Expenditure Mileage		Category/ Type 002	N	11 / 21	2014
	Name of Federal Candidate		Support	Office Sough	nt: House	District: 00
	Ms. Mary L Landrieu		Oppose	Preside	ent X Senate	e State: LA
	Calendar Year-To-Date Per Election for Office Sought	7 7 7	554635.78	Disbursement 2014	nt For: Prin	nary General Runoff
	Full Name of Payee					tion/Dissemination
	Jessica R Resendiz				11 / 21	/ Y Y Y Y Y Y 2014
	Mailing Address 9685 Paula St			Amou	unt	
	City	State	Zip Code	— Г.		70.00
	Keithville	LA	71047		of Disbursement	
	Purpose of Expenditure Salary		Category/ Type 001		11 / 21	2014
	Name of Federal Candidate		Support	Office Sough	nt: House	e District: 00
	Ms. Mary L Landrieu		Oppose	Presid	lent X Senat	e State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For: Prin	nary General Runoff
	(a) SUBTOTAL of Itemized Independent Ex	penditures		•	7	97.60
	(b) SUBTOTAL of Unitemized Independent	Expenditures		•	-	7
	(c) TOTAL Independent Expenditures			•		· · · · · ·
	Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized				

[Electronically Filed]

05

Date

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Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITU

MIZED INDEPENDENT EXPENDI	TURES			PAGE 202 OF 320 FOR LINE 24 OF FORM 3X
E OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER V
omen Speak Out PAC			C	C00530766
k if 24-hour report 48-hour re	port New r	eport Amends repor	t filed on	/ / D = D / Y = Y = Y = Y
Full Name of Payee Jessica R Resendiz			Date of F	Public Distribution/Dissemination y
Mailing Address 9685 Paula St			Amount	21 2014
City	State	Zip Code		30.90
Keithville	LA	71047		on ID: c706e7d2-de69-4763-a Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 11	21 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For 2014 \times Othe	or: Primary General r (specify) ▶ Runoff
Full Name of Payee Darius Beverly			Date of F	
Mailing Address 157 Bishop Drive			Amount	
City	State	Zip Code		60.00
Avondale	LA	70094		on ID: 60c24834-459c-4a39-9 Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11	21 / 2014
Name of Federal Candidate		Support	Office Sought:	House District: 00
Ms. Mary L Landrieu		X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement F	or: Primary General r (specify) ▶ Runoff
a) SUBTOTAL of Itemized Independent Expendent Subtotal of Unitemized Independent b) TOTAL Independent Expenditures	Expenditures		> Contre	90.90

Ms. Emily Buchanan [Electronically Filed] 2015 05 18 Date

PAGE	203	OF	320
FOR L	INE 24	OF F	320 ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends rep	ort filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Ms. Dinah Beverly Mailing Address 457 Bishan Britis	11 / 21 / 2014
157 Bishop Drive	Amount
City State Zip Code	60.00
Avondale LA 70064	Transaction ID : 27a1b4c2-bc79-4632-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 21 2014
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014
Full Name of Payee	
Ms. Dinah Beverly	Date of Public Distribution/Dissemination
Mailing Address 157 Bishop Drive	Amount
City State Zip Code	7.50
Avondale LA 70064	Transaction ID: 2779f2eb-1558-4a49-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 / 21 / 2014
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 67.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Dat	e 05 18 2015
Signature	

ΤEI	MIZED INDEPENDENT EXPEND	DITURES				PAGE 204 FOR LINE 2	OF 320 4 OF FORM 3X
	ME OF COMMITTEE (In Full) Omen Speak Out PAC						ON NUMBER ▼
	•				C	C00530766	
Che	eck if 24-hour report 48-hour	report New repo	ort Amends	s report	filed on	/ D D /	Y = Y = Y
Т	Full Name of Payee				Date of Pub	lic Distribution/	Dissemination
	Susan K Hamby				11	21	2014
	Mailing Address 202 Violet St				Amount		
ŀ	City	State	Zip Code				35.00
	West Monroe	LA	71292			ID: bb5c8ebb- oursement or C	
١	Purpose of Expenditure Salary		Category/ Type	001	M 11	21	2014
ı	Name of Federal Candidate		Supp	ort	Office Sought:	House	District: 00
١	Ms. Mary L Landrieu		Х Орро	se	President	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78		Disbursement For: 014 \times Other (s	Primary	General Runoff
ľ	Full Name of Payee Susan K Hamby					olic Distribution	Dissemination
ľ	Mailing Address 202 Violet St				Amount	21	2014
ŀ	City	State	Zip Code				1.65
	West Monroe	LA	71292			ID: a9b06055- bursement or C	
	Purpose of Expenditure Mileage		Category/ Type	002	M 11	21	2014
ľ	Name of Federal Candidate		Supp	ort	Office Sought:	House	District:00
	Ms. Mary L Landrieu		X Oppo	ose	President	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78		Disbursement For: 2014 Other (Primary specify)	General Runoff
				'			
(a) SUBTOTAL of Itemized Independent	Expenditures			·	7	36.65
(b) SUBTOTAL of Uniternized Independe	ent Expenditures			·		
(c) TOTAL Independent Expenditures					7	
W	Under penalty of perjury I certify that the vith, or at the request or suggestion of, a arty committee) any political party comm	any candidate or authorized					
	Ms. Emily Buchanan	[Electron	ically Filed]	Б.	M / D 18		Y Y Y
	Signature	Elicenom		Date	05 18	201	·

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 205 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Nomen Speak Out PAC		
		C C00530766
heck if 24-hour report 48-hour report New report	ort Amends repor	rt filed on
Full Name of Payee Stephanie L Heun		Date of Public Distribution/Dissemination
Mailing Address 8026 S Wilwood Dr Apt 101		11 21 2014 Amount
City State	Zip Code	11.60
Oak Creek WI	53154	Transaction ID: 01a94834-92f9-4c2f-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 21 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Francis Richardson		11 21 2014
Mailing Address 220 Doucet Rd		Amount
City State	Zip Code	35.00
Lafayette LA	70503	Transaction ID : 31fd28f8-4ab8-4875-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 21 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) Runoff
		V Other (Specify)
(a) SUBTOTAL of Itemized Independent Expenditures		46.60
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

	age# 15951393315		
	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 206 OF 320
-	IMPER ENDERT EXILENDITORIES		FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
W	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New re	eport Amends rep	ort filed on
	Full Name of Payee Francis Richardson		Date of Public Distribution/Dissemination
	Mailing Address 220 Doucet Rd		11 21 2014 Amount
	City State	Zip Code	1.02
	Lafayette LA	70503	Transaction ID: e9cd5bfa-21c0-4fc6-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 21 / 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Cher (specify) ► Runoff
	Full Name of Payee Alice K Salazar		Date of Public Distribution/Dissemination
	Mailing Address 605 W Houston St		Amount
	City State	Zip Code	80.00
	Marshall TX	75633	Transaction ID: d4097fad-f521-4c72-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 21 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 81.02
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						

		OF 320 24 OF FORM 3X
FEC		ON NUMBER ▼
С	C00530766	
I = M	/ D = D /	Y Y Y Y Y
of Pub	olic Distribution	/Dissemination
11 ^M	21	2014
ınt		
	ID - 4 - 4 - 00 d	57.90
	ID: 1ecfe08d-obursement or 0	
11	21	2014
nt:	House	District:00
ent	X Senate	State: LA
nt For:	Primary	/ General
ther (s	specify) 🕨	Runoff
	olic Distribution	/Dissemination
11	21	2014
ınt		
		100.00
ection	ID : fa6c09b3- bursement or 0	
11	21 /	2014
nt:	House	District:00
ent	X Senate	State: LA
nt For:	Primary	/ General
Other (specify) ►	Runoff

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼						
Women Speak Out PAC						
					3 00000700	
Che	ck if 24-hour report 48-hour report Ne	ew repo	ort Amends repo	rt filed	d on Man / Dad / Yayayay	
П	Full Name of Payee				Date of Public Distribution/Dissemination	
	Alice K Salazar				11 21 2014	
	Mailing Address 605 W Houston St				Amount	
					7 till Gall	
	City State		Zip Code		57.90	
	Marshall TX		75633		Transaction ID : 1ecfe08d-d029-406f-a Date of Disbursement or Obligation	
	Purpose of Expenditure Mileage		Category/ Type 002		11 21 2014	
ı	Name of Federal Candidate		Support	Offic	e Sought: House District: 00	
	Ms. Mary L Landrieu		Oppose		President State: LA	
	Calendar Year-To-Date	_	55,4005,70		ursement For: Primary General	
	Per Election for Office Sought		554635.78	2014	Other (specify) ► Runoff	
	Full Name of Payee				Date of Public Distribution/Dissemination	
	Ana L Esquivel				11 21 2014	
	Mailing Address 284 Cr 1401				Amount	
-	O'to		7:- 0-4-		100.00	
	City State Carthage TX		Zip Code		Transaction ID : fa6c09b3-1ac5-40c7-9	
			75633		Date of Disbursement or Obligation	
	Purpose of Expenditure Salary		Category/ Type 001		11 / 21 / 2014	
-	Name of Federal Candidate		Support	Offic	e Sought: House District: 00	
	Ms. Mary L Landrieu		Oppose		President State: LA	
	Calendar Year-To-Date				ursement For: Primary General	
	Per Election for Office Sought		554635.78	2014	4	
(8	a) SUBTOTAL of Itemized Independent Expenditures			. •	157.90	
(l	b) SUBTOTAL of Unitemized Independent Expenditures			. •		
(0	c) TOTAL Independent Expenditures			•		
W	nder penalty of perjury I certify that the independent expendith, or at the request or suggestion of, any candidate or authors arty committee) any political party committee or its agent.					
	Ms. Emily Buchanan [E	lectron	ically Filed] Date		05 18 2015	
	Signature		_ Date			

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES	PAGE 20	8 OF 320 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FEC IDENTIFICAT	
Women Speak Out PAC		ION NUMBER V
	C C00530766	
Check if 24-hour report 48-hour report New report Am	nends report filed on	Y = Y = Y
Full Name of Payee	Date of Public Distribution	n/Dissemination
Hilary Townsend	11 / 21	2014
Mailing Address 4506 US Hwy 79 North	Amount	
City State Zip Code		100.00
Deberry TX 75639	Transaction ID : a3cc42e4 Date of Disbursement or	
Purpose of Expenditure Salary Category/ Type	001 11 21	2014
Name of Federal Candidate	Support Office Sought: House	District: 00
Ms. Mary L Landrieu	Oppose President Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primar 2014	ry General Runoff
Full Name of Payee	Date of Public Distributio	n/Dissemination
Taylor De Julian-Hernandez	M M / D D D 21	2014
Mailing Address 284 Cr 1401	Amount	
City State Zip Code		100.00
Carthage TX 75633	Transaction ID: 38d7b3b Date of Disbursement or	
Purpose of Expenditure Salary Category/ Type	001	2014
	Support Office Sought: House	District:00
Ms. Mary L Landrieu	Oppose President Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.75	Disbursement For: Prima 2014	ry General Runoff
	Other (specify)	TUITOII
(a) SUBTOTAL of Itemized Independent Expenditures	······	200.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) CODICIAL OF CHIROHIZOG INCOPORTION EXPORTANCES		450
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported he with, or at the request or suggestion of, any candidate or authorized committee of party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·	

[Electronically Filed]

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Date

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NAME OF COMMITTEE (In Full)

PAGE 209 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
on Mam / Dab / Yayayay
Date of Public Distribution/Dissemination
Amount
52.80 Fransaction ID: 9d19ac0b-7405-4606-a Date of Disbursement or Obligation
11 21 2014
Sought: House District: 00
President Senate State:
sement For:
Date of Public Distribution/Dissemination
Amount
35.00 Fransaction ID: c7843c80-c483-470b-a Date of Disbursement or Obligation
11 21 2014
Sought: House District: 00
President State: LA State:
sement For: Primary General Other (specify) ► Runoff
87.80

Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour r	eport New rep	oort Amends repo	ort filed on
Full Name of Payee Taylor De Julian-Hernandez			Date of Public Distribution/Dissemination
Mailing Address 284 Cr 1401			11 21 2014 Amount
City Carthage	State TX	Zip Code 75633	52.80 Transaction ID : 9d19ac0b-7405-4606-a
Purpose of Expenditure Mileage		Category/ Type 002	Date of Disbursement or Obligation 11 21 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	,,,,	554635.78	Disbursement For:
Full Name of Payee Elvis Spears			Date of Public Distribution/Dissemination 11 21 2014
Mailing Address 2150 Hope St			Amount
City New Orleans	State LA	Zip Code 70119	35.00 Transaction ID: c7843c80-c483-470b-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 21 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent E	Expenditures		87.80
(b) SUBTOTAL of Unitemized Independen	at Expenditures		·
(c) TOTAL Independent Expenditures			>
	ny candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
Ms. Emily Buchanan	[Electron	nically Filed]	05 18 2015
Signature	Linearia	Date	, 05 18 2015

PAGE	210	OF	320
FOR L	NE 24	OF F	FORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	t Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Elvis Spears Mailing Address 2450 Hone St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
2150 Hope St		Amount
City State Z	Zip Code	10.50
	70119	Transaction ID: dc2ce21b-8ada-482d-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Name of Federal Candidate	Support Office	Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disbu 2014	rsement For: Primary General Nother (specify) ► Runoff
Full Name of Payee		Date of Public Distribution/Dissemination
Francesca Blom		11 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 101 Asbury Ct		Amount
City State Z	Zip Code	70.00
Winchester VA 2	22602	Transaction ID : fb0b57c4-5fef-4825-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 21 / 2014
Name of Federal Candidate	Support Office	Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose □	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disbu 2014	rsement For: Primary General Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	80.50
(b) SUBTOTAL of Unitemized Independent Expenditures		
• • • • • • • • • • • • • • • • • • • •	•	7 7
(c) TOTAL Independent Expenditures	>	1 1 7 1 2
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized of party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronica	ally Filed] Date 0.	5 18 2015
Signature	34.0	

	PAGE 211 OF 320 FOR LINE 24 OF FORM 3X
: IC	DENTIFICATION NUMBER ▼
	C00530766
/	D = D / Y = Y = Y
blid	Distribution/Dissemination
/	21 / 2014
-	10.00
	0 : 03069ee8-54e1-4dfe-9 ursement or Obligation

						FOR LINE 2	24 OF FORM 3X
NAME OF COMMITTEE (In Full)					FEC	IDENTIFICATION	ON NUMBER ▼
Women Speak Out PAC					С	C00530766	
Check if 24-hour report 48-hour report	New repo	ort Ame	ends repo	ort filed	on M M	/ D D /	Y = Y = Y = Y
Full Name of Payee					Date of Pu	blic Distribution	/Dissemination
Cynthia N Schmit					11	21	2014
Mailing Address 2226 Taft Circle Apt 1					Amount		
City	State	Zip Code					10.00
Winchester	VA	22601				ID: 03069ee8- sbursement or 0	
Purpose of Expenditure Salary		Category/ Type	001		M 11	21	2014
Name of Federal Candidate		S	upport	Office	Sought:	House	District: 00
Ms. Mary L Landrieu		\mathbf{X} c)ppose		President	Senate	State: LA
Calendar Year-To-Date		554605.70			rsement For	: Primary	General
Per Election for Office Sought	7 7	554635.78		2014	X Other	(specify) ▶	Runoff
Full Name of Payee ERIC TABARY					Date of Pu	blic Distribution	
					11	21	2014
Mailing Address 6101 NORA ST					Amount		
City	State	Zip Code					65.00
METAIRIE	LA	70003				ID: 70cb20ca sbursement or 0	
Purpose of Expenditure Salary		Category/ Type	001		M - M	21	
Name of Federal Candidate			Support	Office	Sought:	House	District: 00
Ms. Mary L Landrieu			Oppose		Ü	X Senate	State: LA
Calendar Year-To-Date		554635.78		Disbu 2014	ırsement For		/ General
Per Election for Office Sought	7 7	004000.70			X Other	(specify) ►	Runoff
(a) SUBTOTAL of Itemized Independent Expenditure	s			▶		7-11-7-	75.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ures			·· •		<i>T</i> <i>T</i>	
(c) TOTAL Independent Expenditures						-	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized						
Ms. Emily Buchanan	[Elastus	ically Eiledi		M	M / D		YY
Signature	[Electroni	ically Filed] -	Date	9 0	5 18	3 201	5

S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)						
T	EMIZED INDEPENDENT EXPENDITURES				PAGE 212 FOR LINE 2		320
NI /	AME OF COMMITTEE (In Full)						
	Vomen Speak Out PAC			FEC	IDENTIFICATION	ON NUMB	ER ▼
_				C	C00530766		
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed or	n Mark	/ D = D /	Y	Y
	Full Name of Payee ERIC TABARY		[Date of Pub	olic Distribution	/Dissemina	tion
	ERIC TABARY			M M M	/ D D /	2014	
	Mailing Address 6101 NORA ST		A	Amount			
	City State	Zip Code				2	.10
	METAIRIE LA	70003			ID: 383b3bc7-bursement or (-07f5-4d27	
	Purpose of Expenditure Mileage	Category/ Type 002		11	/ 21	2014	
	Name of Federal Candidate						00
	Ms. Mary L Landrieu	Support	Office S	•	House	District:	00
	No. Mary L Landined	X Oppose	P	resident	Senate	Siale. —	LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ement For: Other (Runoff	eneral
	Full Name of Payee		1	Date of Pul	blic Distribution	/Dissemina	ıtion
	Christopher L Gilbert			M = M	/ D D /	2014	
	Mailing Address 55 Lovell Johnson Rd			-	21	201	
	SO EGYON GOTHISON NO		/	Amount			
	City State	Zip Code			0-1-1-0-	80.	00
	Picayune MS	39466			ÍD : c2e4caf3- sbursement or (-9
	Purpose of Expenditure Salary	Category/ Type 001		M M 11	21	201	
	Name of Federal Candidate						00
	Ms. Mary L Landrieu	Support	Office S	Sought:	House	District:	00
	ivis. ivially E callulleu	X Oppose	P	resident	Senate	State:	LA
	Calendar Year-To-Date	554635.78	2014	ement For:		/ G	eneral
	Per Election for Office Sought	004000.70		X Other ((specify) ►	Runoff	
	(a) SUBTOTAL of Itemized Independent Expenditures		▶			82.10)
	(b) SUBTOTAL of Unitemized Independent Expenditures		··· •		7 7		
	(a) TOTAL Index and art Fun and it was						
	(c) TOTAL Independent Expenditures		··· •		<i></i>		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.						

[Electronically Filed]

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Date

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SCHEDULE ITEMIZED IN

E E (FEC Form 3X) DEPENDENT EXPENDITURES	PAGE 213 OF 320 FOR LINE 24 OF FORM 3X
IMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
peak Out PAC	

Maman Charle (In Full)				FEC	IDENTIFICATI	ON NUMBER ▼
Women Speak Out PAC				С	C00530766	
Check if 24-hour report 48-hour re	port New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y = Y = Y
Full Name of Payee			Da	ate of Pul	olic Distribution	/Dissemination
Christopher L Gilbert				M = M	/ 21 /	2014
Mailing Address 55 Lovell Johnson Rd			Ar	mount	21	2014
C:A.	Ctata	Zin Codo	— г			47.10
City Picayune	State MS	Zip Code 39466	Tra	neaction	ID : 868bf7db-	
,	IVIO	39400			bursement or	
Purpose of Expenditure Mileage		Category/ Type 002		11	21	2014
Name of Federal Candidate		Support	Office So	mapt.	House	District: 00
Ms. Mary L Landrieu		Oppose		esident	X Senate	State: LA
Calendar Year-To-Date			Disburse	ment For:	Primary	/ General
Per Election for Office Sought		554635.78	2014	Other (specify) ▶	Runoff
Full Name of Payee						/Diagonia ation
Eva M Johnston			Di	M = M	/ D D /	n/Dissemination
Mailing Address				11	21	2014
2517 N 47th St			Aı	mount		
City	State	Zip Code				35.00
Milwaukee	WI	53210	I		ID: 11f69b46- sbursement or	
Purpose of Expenditure Salary		Category/ Type 001		M M	21	2014
Name of Federal Candidate		Support	Office Sc	onapt.	House	District: 00
Ms. Mary L Landrieu		Oppose		esident	X Senate	State: LA
Calendar Year-To-Date			Disburse	ment For:	Primar	y General
Per Election for Office Sought		554635.78	2014		(specify) ▶	Runoff
(a) SUBTOTAL of Itemized Independent E	xpenditures				, , ,	82.10
(b) SUBTOTAL of Unitemized Independent	Expenditures		. •			
(c) TOTAL Independent Expenditures			•		p 1 1 4	
Under penalty of perjury I certify that the						
with, or at the request or suggestion of, an party committee) any political party commit						
	lee or its agent.	ically Filed] Date	M M M	/ 18		Y Y 15

PAGE	214	OF	320 DRM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Joneisha Stewart	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2329 Runnymede Dr	Amount
City State Zip Code	40.00
Marrero LA 70072	Transaction ID: e9bbb682-cff8-4476-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For: Primary General Other (specify) Runoff
	Z other (speerly) P
Full Name of Payee Joneisha Stewart	Date of Public Distribution/Dissemination
Mailing Address 2329 Runnymede Dr	11 21 2014 Amount
City State Zip Code	9.00
Marrero LA 70072	Transaction ID : 5420114a-0981-469d-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	49.00
(b) CURTOTAL of Unitersized Independent Funerality	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

(c) TOTAL Independent Expenditures.....

MIZED INDEPENDENT EXPENDITURES		PAGE 215 OF 320 FOR LINE 24 OF FORM 3)
ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC		C C00530766
k if 24-hour report 48-hour report Ne	ew report Amends report fi	iled on D D / Y Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Evelyn Lesaicherre		11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 629 Radiance Ave		
		Amount
City State	Zip Code	80.00
Metairie LA	70001	Transaction ID: d8d1f398-d711-4405-a Date of Disbursement or Obligation
Purpose of Expenditure	Category/	Date of Disbursement of Obligation
Salary	Type 001	11 21 2014
Name of Federal Candidate	Support Of	ffice Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose [President State: LA
Calendar Year-To-Date		isbursement For: Primary General
Per Election for Office Sought	554635.78	Other (specify) Runoff
Full Name of Payee		Date of Public Distribution/Dissemination
Evelyn Lesaicherre		11 21 2014
Mailing Address 629 Radiance Ave		Amount
		Amount
City State	Zip Code	3.90
Metairie LA	70001	Transaction ID: f88c310b-67fd-45f3-a Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M = M / D = D / Y = Y = Y
Mileage	Type 002	11 21 2014
Name of Federal Candidate	Support O	office Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President X Senate State: LA
Calendar Year-To-Date	D	isbursement For: Primary Genera
Per Election for Office Sought	554635.78	014

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 216 OF 320			
	IMIZED INDEI ENDENT EXI ENDITORIES		FOR LINE 24 OF FORM 3X			
VΑ	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
٧	Vomen Speak Out PAC					
			C C00530766			
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on			
	Full Name of Payee		Date of Public Distribution/Dissemination			
	Jeanne Tribou	M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1				
	Mailing Address 22369 Ponderosa Dr.	Amount				
	ZZOGO I GINGGOGG DI.					
	City State	Zip Code	65.00			
	Mandeville LA	70471	Transaction ID : daee2203-18dc-4b6e-8 Date of Disbursement or Obligation			
	Purpose of Expenditure	Category/	M = M / D = D / Y = Y = Y			
	Salary	Type 001	11 21 2014			
	Name of Federal Candidate	Support	Office Sought: House District: 00			
	Ms. Mary L Landrieu	Oppose	President Senate State: LA			
	Calendar Year-To-Date		Disbursement For: Primary General			
	Per Election for Office Sought	554635.78	2014			
	Full Name of Payee		Date of Public Distribution/Dissemination			
	Jeanne Tribou		11 21 2014			
	Mailing Address 22369 Ponderosa Dr.		Amount			
			7.00			
	City State	Zip Code	7.80 Transaction ID : b720dae9-f3c1-49f0-b			
	Mandeville LA	70471	Date of Disbursement or Obligation			
	Purpose of Expenditure Mileage	Category/ 002	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Willougo	Type 002	2014			
	Name of Federal Candidate	Support	Office Sought: House District: 00			
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA			
	Calendar Year-To-Date	'ariari ari	Disbursement For: Primary General			
	Per Election for Office Sought	554635.78	2014			
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 72.80			
	(b) SUBTOTAL of Unitemized Independent Expenditures					
	• • • • • • • • • • • • • • • • • • • •		49. 49. 40.			
	(c) TOTAL Independent Expenditures					
			7 7 7			

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						

PAGE 217 OF FOR LINE 24 OF FO	
FEC IDENTIFICATION NUM	IBER ▼
C C00530766	
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of Public Distribution/Dissemi	nation
	14
nt	
5	50.00
ction ID : 0a7fda4a-7736-4fa of Disbursement or Obligation	ı
11 21 20	
t: House District:	00
ent X Senate State:	LA
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ther (specify) Runo	
of Public Distribution/Dissemi	nation
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oction ID : fc76ed45-33c5-47f of Disbursement or Obligation	
11 21 / 22	014
nt: House District:	00
ent X Senate State:	LA
nt For: Primary	General
Other (specify) ►Runo	off
59.	60

Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼				
Women Speak Out FAC	C C00530766				
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee	Date of Public Distribution/Dissemination				
Cathy Longtin	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Mailing Address 827 Navavre Ave	Amount				
City State Zip	Code 50.00				
	124 Transaction ID: 0a7fda4a-7736-4fa9-a Date of Disbursement or Obligation				
Purpose of Expenditure Salary	ategory/ Type 001 11 21 2014				
Name of Federal Candidate	Support Office Sought: House District: 00				
Ms. Mary L Landrieu	X Oppose President X Senate State: LA				
Calendar Year-To-Date	Disbursement For: Primary General				
	54635.78 2014				
Full Name of Payee	Date of Public Distribution/Dissemination				
Cathy Longtin	11 21 2014				
Mailing Address 827 Navavre Ave	Amount				
City State Zip) Code 9.60				
	Transaction ID : fc76ed45-33c5-47f0-9 Date of Disbursement or Obligation				
Purpose of Expenditure Mileage Ca	ategory/ Type 002 11 21 2014				
Name of Federal Candidate	Support Office Sought: House District: 00				
Ms. Mary L Landrieu	Oppose President Senate State: LA				
Calendar Year-To-Date Per Election for Office Sought 5	Disbursement For: Primary General 2014 Other (specify) ▶ Runoff				
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	>				
Under penalty of perjury I certify that the independent expenditures reposition, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.					
Ms. Emily Buchanan [Electronically	y Filed] Date 05 18 2015				
Signature					

PAGE 218 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
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of Public Distribution/Dissemination
11 21 / 2014
nt
10.00 ction ID : 74e49b46-2695-414c-a of Disbursement or Obligation
11 21 / 2014
it: House District: 00
ent X Senate State: LA
t For: Primary General
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oction ID : eb718c91-31f7-4639-a of Disbursement or Obligation
11 / 21 / 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) Runoff

NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼				
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour r	report New repo	ort Amends repo	ort filed	on Man / Dab / Yayayay
Full Name of Payee				Date of Public Distribution/Dissemination
Donna S Wilson				11 21 2014
Mailing Address 4456 Country Hill Dr				Amount
City	State	Zip Code		10.00
Baton Rouge	LA	70816		Transaction ID : 74e49b46-2695-414c-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 / 21 / 2014
Name of Federal Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Landrieu		Oppose		President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	7	554635.78	Disbu 2014	rrsement For: Primary General Other (specify) ► Runoff
Full Name of Payee	<u> </u>			Date of Public Distribution/Dissemination
Donna S Wilson				11 21 2014
Mailing Address 4456 Country Hill Dr				Amount
City	State	Zip Code		6.00
Baton Rouge	LA	70816		Transaction ID: eb718c91-31f7-4639-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 21 2014
Name of Federal Candidate		Support	Office	Sought: House District:00
Ms. Mary L Landrieu		X Oppose		President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	ursement For: Primary General
The first terms of the first ter	<u> </u>			X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent E	Expenditures			16.00
(b) SUBTOTAL of Unitemized Independer	nt Expenditures		. •	
(c) TOTAL Independent Expenditures			•	
				ade in cooperation, consultation, or concert r, or (if the reporting entity is not a political
party committee) any political party comm				
	ittee or its agent.	cally Filed] Date	. 0s	5 18 2015

PAGE 219 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M = M / D = D / Y = Y = Y = Y
ate of Public Distribution/Dissemination
11 / 21 / 2014
nount
70.00 nsaction ID : 2c4020bd-6c3f-4c3a-a ate of Disbursement or Obligation
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ught: House District: 00
esident Senate State: LA
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nsaction ID : 56e2338a-27bc-4206-b ate of Disbursement or Obligation
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nsaction ID: 56e2338a-27bc-4206-b ate of Disbursement or Obligation M M M / 21 / 2014 Pught: House District: 00 esident Senate State: LA ment For: Primary General
nsaction ID : 56e2338a-27bc-4206-b ate of Disbursement or Obligation M 1
nsaction ID: 56e2338a-27bc-4206-b ate of Disbursement or Obligation M M M / 21 / 2014 Pught: House District: 00 esident Senate State: LA ment For: Primary General
nsaction ID: 56e2338a-27bc-4206-b ate of Disbursement or Obligation M 11
nsaction ID: 56e2338a-27bc-4206-b ate of Disbursement or Obligation M 11

	NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
VV	omen Speak Out PAC			C C00530766		
Che	Check if 24-hour report 48-hour report New report Amends report filed on					
$\overline{}$	Full Name of Payer			(D. I. ; D. ; i ; i ; i ; i ; i ; i ; i ; i ; i ;		
	Full Name of Payee Philip Elkins		Dat	te of Public Distribution/Dissemination		
ŀ	Mailing Address			11 21 2014		
	227 Lincoln Dr		Am	ount		
ľ	City State	Zip Code		70.00		
	Bossier City LA	71111		saction ID : 2c4020bd-6c3f-4c3a-a te of Disbursement or Obligation		
	Purpose of Expenditure Salary	Category/ Type 001		11 21 / 2014		
ı	Name of Federal Candidate	Support	Office Sou	ight: House District: 00		
	Ms. Mary L Landrieu	Oppose		sident X Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursem 2014	nent For:		
ŀ	Full Name of Payee	l		te of Public Distribution/Dissemination		
	Philip Elkins		Da	11 21 2014		
	Mailing Address 227 Lincoln Dr		Am	nount		
1			7	Out.		
	City State	Zip Code		15.54		
	Bossier City LA	71111		saction ID: 56e2338a-27bc-4206-b te of Disbursement or Obligation		
	Purpose of Expenditure Mileage	Category/ Type 002		11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
ľ	Name of Federal Candidate	Support	Office Sou	ıght: House District: 00		
	Ms. Mary L Landrieu	Oppose		sident State: LA		
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursem			
	Per Liection for Office Sought	7	X	Other (specify) ►Runoff		
((a) SUBTOTAL of Itemized Independent Expenditures		•	85.54		
((b) SUBTOTAL of Unitemized Independent Expenditures		. [
	() =====		F			
(c) TOTAL Independent Expenditures		• _	7 7 7		
٧	Under penalty of perjury I certify that the independent expenditu vith, or at the request or suggestion of, any candidate or authority committee) any political party committee or its agent.					
	Ms. Emily Buchanan [Elect	tronically Filed] Date	M M M	/ 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Signature	Date				

Signature

	CHEDULE E (FEC Form 3X)		
ΓΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 220 OF 320 FOR LINE 24 OF FORM 3X
1£	AME OF COMMITTEE (In Full)		<u> </u>
	Vomen Speak Out PAC		C C00530766
— Ch	neck if 24-hour report 48-hour report New report	port Amends repor	rt filed on
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination
	Mailing Address		11 21 / 2014
	121 Ohara Dr		Amount
	City State	Zip Code	100.00
	Salisbury NC	28147	Transaction ID : 313fb12f-a2cc-4ae5-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 21 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination
	Mailing Address 121 Ohara Dr		Amount
	City State	Zip Code	72.30
	Salisbury NC	28147	Transaction ID : b14c67df-99ca-46d3-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 21 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
_	(a) SUBTOTAL of Itemized Independent Expenditures		172.30
	(b) SUBTOTAL of Unitemized Independent Expenditures		· · · · · · · · · · · · · · · · · · ·
	(c) TOTAL Independent Expenditures		•
,	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

18

TEMIZED INDEP	PENDENT EXPEND	DITURES			PAGE 221 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITT	, ,				FEC IDENTIFICATION NUMBER ▼
Women Speal	k Out PAC				C C00530766
Check if 24-hour	r report 48-hour	report New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Pay					Date of Public Distribution/Dissemination
Christine Ste					11 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	100 Asbury Ct				Amount
City		State	Zip Code		70.00
Winchester		VA	22602	1	Transaction ID: 06d72723-3f47-4885-8 Date of Disbursement or Obligation
Purpose of Exper Salary	nditure		Category/ Type 001		11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal	Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Landr	rieu		Oppose		President Senate State: LA
Calendar Yea Per Election	ar-To-Date for Office Sought	7 7	554635.78	2014	rsement For:
Full Name of Pay Jazmine d (Date of Public Distribution/Dissemination
Mailing Address	100 ASBURY CT				Amount
City		State	Zip Code		70.00
WINCHESTER		VA	22602	-	Transaction ID : fe2b018d-a0f9-4bd9-9 Date of Disbursement or Obligation
Purpose of Expe Salary	nditure		Category/ Type 001		11 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal	Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Land	rieu		X Oppose		President Senate State: LA
Calendar Ye Per Election	ear-To-Date n for Office Sought		554635.78	Disbur 2014	rsement For:
(a) SUBTOTAL of	Itemized Independent	Expenditures		·· ▶	140.00
(b) SUBTOTAL of	Unitemized Independe	ent Expenditures		·· •	
(c) TOTAL Indepe	ndent Expenditures			·· •	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ms. E	Emily Buchanan	[Electron	ically Filed] Date	_ M	5 18 2015
Signature			_ Date	, L	

Signature

17

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 222 OF 320
			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full) Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
V .	70men Speak Out FAC		C C00530766
Эh	neck if 24-hour report 48-hour report New report	Amends report f	filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Jon E Conner		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		11 21 2014 Amount
	0.4		70.00
	· ·	Code	70.00
		2602	Transaction ID: 6f6222ec-13f3-4c43-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary Ca	Category/ Type 001	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support O	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought 55		Disbursement For: Primary General 014
	Full Name of Payee Rodney O Culbreath		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		Amount
	City State Zip	p Code	70.00
	'	2602	Transaction ID : 0fcd7d33-88b2-4323-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	Date of Disbursement of Obligation 11 21 2014
	Name of Federal Candidate	Support C	Office Sought: House District: 00
	Ms. Mary L Landrieu	Support Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	D	Disbursement For: Primary General 2014
_	(a) SUBTOTAL of Itemized Independent Expenditures		140.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures	······•	
	Under penalty of perjury I certify that the independent expenditures repwith, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

18

PAGE 223 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
of Public Distribution/Dissemination
11 / 21 / 2014
int
70.00
oction ID : 01256539-4f43-4065-9 of Disbursement or Obligation
11 21 / 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) ▶Runoff
of Public Distribution/Dissemination
11 21 7 2014
ınt
70.00
70.00 action ID : 3bc4b874-4e9d-47f2-a
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70.00 action ID : 3bc4b874-4e9d-47f2-a of Disbursement or Obligation 11
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70.00 action ID: 3bc4b874-4e9d-47f2-a of Disbursement or Obligation 11
70.00 action ID: 3bc4b874-4e9d-47f2-a of Disbursement or Obligation 11

NAME OF COMMITTEE (In Full) Women Speak Out PAC Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Rodney D Culbreth Mailing Address 100 Asbury CT Amou 3200 Dam Neck Rd City State Zip Code VA Winchester 22602 Transa Date Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Preside Disbursemen Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Rze Culbreath Mailing Address 100 Asbury Ct Amou City State Zip Code Winchester VA22602 Transa Date Purpose of Expenditure Category/ 001 Salary Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

PAGE	224	OF	320
FOR L	INE 24	OF F	320 ORM 3X

	E OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
VV	omen Speak Out PAC		C C00530766
Che	ck if 24-hour report 48-hour report New repor	t Amends repor	t filed on Man / Dad / Yayayay
Т	Full Name of Payee		Date of Public Distribution/Dissemination
	Christopher Marquess		11 22 / Y Y Y Y
	Mailing Address 110 W Pecan St		Amount
-	City State Z	Zip Code	50.00
		70586	Transaction ID: 9d45b8b7-f03c-45e7-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
L	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
1	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Г	Full Name of Payee		Date of Public Distribution/Dissemination
	Christopher Marquess		11 22 2014
	Mailing Address 110 W Pecan St		Amount
┢	City State Z	Zip Code	32.40
	•	70586	Transaction ID: d529c8ea-6218-4c60-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
┢	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
(8	s) SUBTOTAL of Itemized Independent Expenditures		
(k	substitute of Unitermized Independent Expenditures		•
(0	e) TOTAL Independent Expenditures		>
W	nder penalty of perjury I certify that the independent expenditures reith, or at the request or suggestion of, any candidate or authorized carty committee) any political party committee or its agent.		
	Ms. Emily Buchanan [Electronical	ally Filed] Date	05 18 2015
	Signature	Dale	

S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)		
TΕ	MIZED INDEPENDENT EXPENDITURES		PAGE 225 OF 320
\1/	ME OF COMMITTEE (In Full)		FOR LINE 24 OF FORM 3X
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
_			C C00530766
Ch	eck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Timothy Foley		11 22 2014
	Mailing Address 20679 Glenbrook Terrace		Amount
	City State	Zip Code	55.00
	Sterling VA	20165	Transaction ID : 596ecdd6-a4ae-40fc-b Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	M - M / D - D / Y - Y - Y
	Salary	Type 001	11 22 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Nicholas O Wilcox		Date of Public Distribution/Dissemination
	Mailing Address 1981 Cherokee St		11 22 2014 Amount
	City State	Zip Code	50.00
	Baton Rouge LA	70806	Transaction ID: 42014262-bf7b-42d5-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 22 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 105.00
	(h) OUDTOTAL of Heiteriand belonged by Empediture		
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		. •
			4 4
	Under penalty of perjury I certify that the independent expenditure		
	with, or at the request or suggestion of, any candidate or authorize	eu committee or agent o	or entrier, or (in the reporting entity is not a political

[Electronically Filed]

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Date

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PAGE FOR L		OF OF FO	320 DRM 3X		
DENTIFICATION NUMBER ▼					
DENTIFI	CATION	NUM	BER ▼		

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Nicholas O Wilcox Mailing Address 4094 Charakse St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1981 Cherokee St		Amount
City State Zip	Code	4.50
		Transaction ID : f4a81fe4-d7bd-4ab9-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Ca	ategory/ Type 002	11 22 7 2014
Name of Federal Candidate	Support Office	Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought 55	Disbu 2014	rsement For: Primary General ☐ Other (specify) ► Runoff
Full Name of Payee Eva M Johnston		Date of Public Distribution/Dissemination
Mailing Address 2517 N 47th St		11 22 2014 Amount
City State Zip	Code	10.00
		Transaction ID: e3273dc3-7306-4df6-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Ca	ategory/ Type 001	11 / 22 / 2014
Name of Federal Candidate	Support Office	Sought: House District:00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 5	Disbu 2014	rsement For: Primary General Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	14.50
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically	y Filed] Date 0	5 18 2015
Signature	Date	

PAGE	227	OF	320 DRM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Janet Morris	Date of Public Distribution/Dissemination
	11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 620 Old Barbome Rd Lot 2	Amount
City State Zip Code	35.00
	Transaction ID: 35768a58-19b2-432c-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary General ☐ Other (specify) Runoff
Full Name of Payee Janet Morris Mailing Address	Date of Public Distribution/Dissemination 11 22 2014
620 Old Barbome Rd Lot 2	Amount
City State Zip Code	4.86
	Transaction ID : fcc88d03-e184-4389-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 / 22 / 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbu 2014	rsement For: Primary General Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	39.86
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	5 18 2015
Signature	

	PAGE FOR L	228 INE 24	OF OF FO	320 ORM 3X	1
- 1					_
D				BER ▼	1

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on M M / D D / Y Y Y Y Y
Full Name of Payee Heather A Smith	Date of Public Distribution/Dissemination
	11 / 22 / 2014
Mailing Address 995 Clairborne Rd	Amount
City State Zip	Code 33.00
	Transaction ID : 1db39b5f-e6b3-4abe-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Ca	ategory/ Type 001 11 22 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 Support
	X Other (specify) ► Runoff
Full Name of Payee Heather A Smith	Date of Public Distribution/Dissemination
Mailing Address 995 Clairborne Rd	11
City State Zip	Code 6.60
Calhoun LA 712	225 Transaction ID : 4a7b9809-e1fd-43fe-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Ca	ategory/ Type 002 11 22 / Y Y Y Y Y Y 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 55	Disbursement For: Primary General 2014
(a) SUBTOTAL of Itemized Independent Expenditures	39.60
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures)
(c) TOTAL Independent Expenditures	·······
Under penalty of perjury I certify that the independent expenditures reposition, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically	y Filed] Date 05 18 2015
Signature	***

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 229 OF 320 FOR LINE 24 OF FORM 3X
N/	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New re	eport Amends rep	ort filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination
	Mailing Address 121 Ohara Dr		11 22 2014 Amount
	City State Salisbury NC	Zip Code 28147	Transaction ID : 1168829c-3208-42f7-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 22 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Colton R Overcash Mailing Address 121 Ohara Dr		Date of Public Distribution/Dissemination M M / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	64.20
	Salisbury	28147	Transaction ID: 668be23d-7772-43fe-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 152.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		>
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Date

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Check if

SCHEDULE E (FE ITEMIZED INDEPENDE

MIZED INDEPENDENT EXPENDITU	IRES			PAGE 230 OF 320 FOR LINE 24 OF FORM 3X
E OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC				
				C C00530766
ck if 24-hour report 48-hour repo	rt New r	eport Amends rep	ort filed	d on
Full Name of Payee				Date of Public Distribution/Dissemination
Philip Elkins				M = M / D = D / Y = Y = Y = Y = 1
Mailing Address 227 Lincoln Dr				
				Amount
City	State	Zip Code		40.00
Bossier City	LA	71111		Transaction ID: 26a6a114-6448-4384-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 22 / Y Y Y Y Y
Name of Federal Candidate		Support	Offic	e Sought: House District: 00
Ms. Mary L Landrieu		Oppose		President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	ursement For: Primary General
	7			Other (specify) ▶ Runoff
Full Name of Payee Philip Elkins				Date of Public Distribution/Dissemination 11 22 2014
Mailing Address 227 Lincoln Dr				Amount
City	State	Zip Code		11.49 Transaction ID : 7a4d569f-b2d7-4670-a
Bossier City	LA	71111		Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Offic	ee Sought: House District: 00
Ms. Mary L Landrieu		X Oppose		President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disb 2014	oursement For: Primary General 4
				X Other (specify) ► Runoff
SUBTOTAL of Itemized Independent Expe	eriaitures		▶	51.49

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 /	18	/	2015
Signature						

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURE	ΞS		PAGE 231 OF 320
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour report	New	report Amends report	filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Elvis Spears			11 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2150 Hope St			Amount
City	State	Zip Code	60.00
New Orleans	LA	70119	Transaction ID : bdc6d414-3162-4d56-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 23 / 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Support Compose	President X Senate State: LA
Calendar Year-To-Date			Disbursement For: Primary General
Per Election for Office Sought		554635.78	Other (specify) Runoff
Full Name of Payee			Date of Public Distribution/Dissemination
Elvis Spears			11 23 2014
Mailing Address 2150 Hope St			Amount
07	Ctoto	71: Oada	10.50
City New Orleans	State LA	Zip Code 70119	Transaction ID : 0a9c67f5-8627-479d-8
Purpose of Expenditure			Date of Disbursement or Obligation
Mileage		Category/ Type 002	11 23 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President State: LA
Calendar Year-To-Date			Disbursement For: Primary General
Per Election for Office Sought	-	554635.78	2014
(a) SUBTOTAL of Itemized Independent Expendit	tures)	70.50
(b) SUBTOTAL of Uniternized Independent Exper	nditures		
		,	7 7 7
(c) TOTAL Independent Expenditures)	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any canon party committee) any political party committee or	didate or authori		
Ms. Emily Buchanan	[Elec:	tronically Filed] Date	05 18 2015
Cianatura			

S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓI	EMIZED INDEPENDENT EXPENDITURES		PAGE 232 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC		C C00530766
_			O cossession
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Cynthia J Christmas		Date of Public Distribution/Dissemination
	Mailing Address		11 23 2014
	1731 Frenchmen St		Amount
	City State	Zip Code	70.00
	New Orleans LA	70116	Transaction ID: 4c870b57-5452-4f73-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 23 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee Cynthia J Christmas		Date of Public Distribution/Dissemination
			11 / 23 / 2014
	Mailing Address 1731 Frenchmen St		Amount
	City State	Zip Code	9.00
	New Orleans LA	70116	Transaction ID : de5dc330-95b5-4547-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President State: LA
	Calendar Year-To-Date	554635.78	Disbursement For: Primary General 2014
	Per Election for Office Sought	334033.70	Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		> 79.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		· • · · · · · · · · · · · · · · · · · ·
	(a) TOTAL lada and at Found lives		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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NAME OF COMMITTEE (In Full)

PAGE 233 OF 320 FOR LINE 24 OF FORM 3X						
FEC IDENTIFICATION NUMBER ▼						
C C00530766						
M = M / D = D / Y = Y = Y						
te of Public Distribution/Dissemination						
11 23 / Y Y Y Y Y						
nount						
30.00 nsaction ID : 46a6615f-a0b0-455e-b te of Disbursement or Obligation						
11 / 23 / Y Y Y Y Y Y						
ught: House District: 00						
sident Senate State: LA						
nent For: Primary General						
Other (specify) ►Runoff						
tte of Public Distribution/Dissemination						
nount						
0.78 nsaction ID: dc368924-9ec0-481e-8 tte of Disbursement or Obligation 11 23 2014						
ught: House District: 00						
sident State: LA						
nent For: Primary General						
Other (specify) Runoff						
30.78						

Wo	men Speak Out PAC				C C00530766
Checl	k if 24-hour report 48-hour repo	rt New rep	port Amends repo	ort filed	on M M / D D / Y Y Y Y Y
	ull Name of Payee				Date of Public Distribution/Dissemination
'	Francis Richardson				11 23 2014
N	failing Address 220 Doucet Rd				Amount
С	ity	State	Zip Code		30.00
- 1	afayette	LA	70503		Transaction ID: 46a6615f-a0b0-455e-b Date of Disbursement or Obligation
	urpose of Expenditure Salary		Category/ Type 001		11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N	lame of Federal Candidate		Support	Office	e Sought: House District: 00
N	//s. Mary L Landrieu		X Oppose		President State: LA State:
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	ursement For: Primary General X Other (specify) ► Runoff
	Francis Richardson				Date of Public Distribution/Dissemination 11 23 2014
N	Mailing Address 220 Doucet Rd				Amount
C	Dity	State	Zip Code		0.78
	_afayette	LA	70503		Transaction ID: dc368924-9ec0-481e-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002		11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N	lame of Federal Candidate		Support	Office	e Sought: House District: 00
ı	Ms. Mary L Landrieu		Oppose		President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbi 2014	ursement For: Primary General Other (specify) ▶ Runoff
(a)	SUBTOTAL of Itemized Independent Expe	enditures		. •	30.78
(b)	SUBTOTAL of Unitemized Independent E	xpenditures		. •	7 7 7
(c)	TOTAL Independent Expenditures			. •	
wit	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	Ms. Emily Buchanan	[Electron	nically Filed] Date	, M	5 18 2015
	Signature				ا لنتنا لنا ت

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	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Lilly Green Mailing Address 205 Matallian Circle	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
205 Medallion Circle	Amount
City State Zip C	Code 40.00
Shreveport LA 7111	Transaction ID: 053e42cd-62bd-4d08-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Cate	regory/ Type 001 11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554	Disbursement For: Primary General 2014 Cother (specify) ► Runoff
Full Name of Payee	
Lilly Green	Date of Public Distribution/Dissemination 11 23 2014
Mailing Address 205 Medallion Circle	Amount
City State Zip C	Code 48.60
Shreveport LA 7111	19 Transaction ID : f0b3ff12-ee4b-41c7-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Cate	regory/ Type 002 11 23 2014
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554	Disbursement For: Primary General 2014 Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
	4
Under penalty of perjury I certify that the independent expenditures report with, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically F	Filed] Date 05 18 2015
Signature	

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)	
EMIZED INDEPENDENT EXPENDITURES	PAGE 235 OF 320 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amends rep	port filed on
Full Name of Payee Mary C Lee	Date of Public Distribution/Dissemination
	11 / 22 / Y 2014
Mailing Address 1030 N Coolidge Ave	Amount
City State Zip Code	50.00
Gonzales LA 70737	Transaction ID: 8eea5ab9-89ce-42df-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M M / D D / Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Mary C Lee	11 22 2014
Mailing Address 1030 N Coolidge Ave	Amount
City State Zip Code	3.60
Gonzales LA 70737	Transaction ID: 61f7d458-b45d-496c-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	2 11 22 2014
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014
	Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	53.60
(h) OUDTOTAL of Helberiand belonged to the conditions	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	

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Date

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	CHEDULE E (FEC Form 3) EMIZED INDEPENDENT EXPEND				PAGE 236 OF 320 FOR LINE 24 OF FORM 3X
۱A	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC				C C00530766
Ch	eck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
	Full Name of Payee Hannah J Landry				Date of Public Distribution/Dissemination
	Mailing Address 1110 N Coolidge				11 22 2014 Amount
	C:t.	Ctata	Zin Cada		60.00
	City Gonzales	State LA	Zip Code 70737		Transaction ID : eb744492-aa8e-422a-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001		11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office	e Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	rrisement For: Primary General Other (specify) ▶ Runoff
	Full Name of Payee Hannah J Landry				Date of Public Distribution/Dissemination
	Mailing Address 1110 N Coolidge				11 22 2014 Amount
	City	Ctata	7in Code		25.20
	City Gonzales	State LA	Zip Code 70737		Transaction ID : aa216f61-20a7-4d50-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002		11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office	e Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	ursement For:
	(a) SUBTOTAL of Itemized Independent	Expenditures		. •	85.20
	(b) SUBTOTAL of Unitemized Independent	nt Expenditures		. •	
	(c) TOTAL Independent Expenditures			•	
	Under penalty of perjury I certify that the	independent expenditures	reported herein were	not ma	ade in cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	2015
Signature					

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FOR I	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Beau Autin	11 22 / Y Y Y Y Y Y Y
Mailing Address 345 Auroura Ave	Amount
City State Zip Code	25.00
	Transaction ID: a213a27c-4b5e-45d9-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For:
Full Name of Payee Beau Autin	Date of Public Distribution/Dissemination
Mailing Address 345 Auroura Ave	11 22 2014 Amount
City State Zip Code	1.47
Metairie LA 70006	Transaction ID: 19da11f4-eda5-4487-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 / 22 / 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbu 2014	rsement For: Primary General ✓ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	26.47
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	5 18 2015
Signature	

PAGE	238	OF	320			
FOR L	INE 24	OF F	ORM 3X			
DENTIFICATION NUMBER ▼						

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
	C C00530766
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report file	
Full Name of Payee	Date of Public Distribution/Dissemination
Elvis Spears	11 22 / 2014
Mailing Address 2150 Hope St	Amount
City State Zip Code	60.00
New Orleans LA 70119	Transaction ID : 6c46571b-071e-48a8-a
New Orleans LA 70119	Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 22 / 2014
Name of Federal Candidate	ce Sought: House District: 00
Support	Tiouse Biotriot.
Ms. Mary L Landrieu Oppose	President State: LA Senate State:
	oursement For: Primary General
Per Election for Office Sought 554635.78 201	4
Full Name of Payee	
Elvis Spears	Date of Public Distribution/Dissemination
	11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2150 Hope St	
2.00 11040 01	Amount
City State Zip Code	10.50
New Orleans LA 70119	Transaction ID : 828672fc-3ab4-463b-a
	Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Type	11 22 2014
Name of Federal Candidate Support Offi	ce Sought: House District:00
Ma Marcel Landers	
Ms. Mary L Landrieu Oppose	President Senate State: LA
55,4005.70	bursement For: Primary General
Per Election for Office Sought 554635.78 201	Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	70.50
(a) SOBTOTAL OF REINIZED INDEPENDENT EXPENDITURES	70.30
(b) SUBTOTAL of Unitemized Independent Expenditures	7
(c) TOTAL Independent Expenditures	
	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	05 18 2015
Signature Date	لىتتا لتا لت

NAME OF

Check if

Signature

Ms. Emily Buchanan

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CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 239 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
check if 24-hour report 48-hour report New rep	port Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee Jon E Conner		Date of Public Distribution/Dissemination
		11 22 2014
Mailing Address 100 Asbury Ct		Amount
City State	Zip Code	20.00
Winchester VA	22602	Transaction ID: 5127c48b-e783-4c95-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 22 / Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
Full Name of Payee Rodney D Culbreth		Date of Public Distribution/Dissemination 11
Mailing Address 100 Asbury CT 3200 Dam Neck Rd		Amount
City State	Zip Code	20.00
Winchester VA	22602	Transaction ID : fcca347c-4da0-4192-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 22 7 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		40.00
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		·
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

2015

05

Date

PAGE 240 OF 320 FOR LINE 24 OF FORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends rep	port filed on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Jazmine d Conner	11 22 / 2014
Mailing Address 100 ASBURY CT	Amount
City State Zip Code	20.00
WINCHESTER VA 22602	Transaction ID: f4ded7ab-d447-4e90-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type Output Output	1 11 22 2014
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For:
Full Name of Pause	Other (speedly)
Full Name of Payee Rze Culbreath	Date of Public Distribution/Dissemination 11 22 2014
Mailing Address 100 Asbury Ct	Amount
City State Zip Code	20.00
Winchester VA 22602	Transaction ID: 1b673c3b-baa1-4ffe-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 00	1 11 D 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 Runoff Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	40.00
(b) SUBTOTAL of Unitemized Independent Expenditures	···· >
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Da	tte 05 18 2015
Signature	

TEMIZED INDEPENDENT	EXPENDITURES			PAGE 241 FOR LINE 2	OF 320 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	•			FEC IDENTIFICATION	ON NUMBER ▼
Women Speak Out PA	AC			C C00530766	
Check if 24-hour report	48-hour report New rep	port Amends repo		1 = M / D = D /	Y W Y W Y
Full Name of Payee Christine Stevens				of Public Distribution/	
Mailing Address	<u> </u>			11 22	2014
100 Asbury	/ Ct		Amou	ınt	
City	State	Zip Code			20.00
Winchester	VA	22602		of Disbursement or C	
Purpose of Expenditure Salary		Category/ Type 001		11 22 /	2014
Name of Federal Candidate		Support	Office Sough	nt: House	District: 00
Ms. Mary L Landrieu		Support Oppose	Preside		State: LA
Calendar Year-To-Date Per Election for Office S	Sought	554635.78	Disbursemen 2014		
				Other (specify)	
Rodney O Culbreath	h			of Public Distribution	Y Y Y Y Y
Mailing Address 100 Asbury	v Ct			11 22	2014
ĺ			Amou	ınt	
City	State	Zip Code			20.00
Winchester	VA	22602		action ID: 398c2772- of Disbursement or C	
Purpose of Expenditure Salary		Category/ Type 001		11 / 22 /	2014
Name of Federal Candidate		Support	Office Sough	nt: House	District:00
Ms. Mary L Landrieu		Oppose	Preside		State: LA
Calendar Year-To-Date Per Election for Office S	Sought	554635.78	Disbursement 2014	nt For: Primary Other (specify) ▶	General Runoff
			-		
(a) SUBTOTAL of Itemized In	ndependent Expenditures		>	7 7	40.00
(b) SUBTOTAL of Unitemized	d Independent Expenditures		·· • [
<u>.</u> <u>.</u>					
(c) TOTAL Independent Expe	enditures		·· •	7 7	
	ertify that the independent expenditures gestion of, any candidate or authorized party committee or its agent.				
Ms. Emily Buchan		nically Filed] Date	e 05	18 201	5 Y J Y
Signature		_	′		

Signature

SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES		DAGE 242 OF 220
IEMIZED INDEPENDENT EXPENDITURES		PAGE 242 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones		11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4106 Martha St		Amount
City State	Zip Code	70.00
Shreveport LA	71109	Transaction ID : e4c66516-37f1-425d-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones		11 22 2014
Mailing Address 4106 Martha St		Amount
City State	Zip Code	6.30
Shreveport LA	71109	Transaction ID : c1707327-1bb4-4dcf-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 22 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		> 76.30
(b) SUBTOTAL of Unitemized Independent Expenditures		-
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	9 05 18 2015

Date

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nage# 15951393352	V			
CHEDULE E (FEC Form 3 EMIZED INDEPENDENT EXPENI				D. 0.5 0.40 0.5 0.00
EMIZED INDEPENDENT EXPEN	JIIUNES			PAGE 243 OF 320 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)				
Nomen Speak Out PAC				FEC IDENTIFICATION NUMBER ▼
vomon opour out i no				C C00530766
neck if 24-hour report 48-hour	report New repo	ort Amends repo	rt filed on	M
Full Name of Payee Carl Brent			Date	of Public Distribution/Dissemination
				11 22 2014
Mailing Address 6718 Lake Willow Dr			Amou	nt
City	State	Zip Code	— I	80.00
New Orleans	LA	70126		ction ID: 4b3ed96b-d3f0-44a4-9 of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	it: House District: 00
Ms. Mary L Landrieu		X Oppose	Preside	ent Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemen 2014	of For:
Full Name of Payee Carl Brent				of Public Distribution/Dissemination
Mailing Address 6718 Lake Willow Dr			Amou	int
City	State	Zip Code		39.90
New Orleans	LA	70126		oction ID: a34e3f18-b83c-43c1-b of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 22 2014
Name of Federal Candidate		Support	Office Sough	nt: House District: 00
Ms. Mary L Landrieu		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemer 2014	nt For:
(a) SUBTOTAL of Itemized Independent	Expenditures			119.90
(b) SUBTOTAL of Unitemized Independent	ent Expenditures		•	7 1 7 1 1 7 1
(c) TOTAL Independent Expenditures			•	17117110

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						

PAGE 244 OF 320 FOR LINE 24 OF FORM 3X	
ENTIFICATION NUMBER ▼	
	- 1

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends	report filed on//
Full Name of Payee	Date of Public Distribution/Dissemination
Theresa a Youngblood	11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 102 S Main Street Apt A2	Amount
City State Zip Code	115.00
Berryville VA 22611	Transaction ID: 48751379-3873-4972-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 11 22 2014
Name of Federal Candidate Suppor	rt Office Sought: House District:00
Ms. Mary L Landrieu Oppose	
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014
5 H.N. (D.	Cuter (speediy) -
Full Name of Payee Jeanne Tribou	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 22369 Ponderosa Dr.	Amount
City State Zip Code	60.00
Mandeville LA 70471	Transaction ID: 15986208-039b-4586-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 11 22 2014
Name of Federal Candidate Suppo	rt Office Sought: House District: 00
Ms. Mary L Landrieu Oppos	
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	175.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	······· >
Under penalty of perjury I certify that the independent expenditures reported herein w with, or at the request or suggestion of, any candidate or authorized committee or age party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	Date 05 18 2015
Signature	

Signature

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 245 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Jeanne Tribou		Date of Public Distribution/Dissemination 11 22 2014
	Mailing Address 22369 Ponderosa Dr.		Amount
	City State	Zip Code	9.60
	Mandeville LA	70471	Transaction ID : f8f4efc2-ff67-48d2-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 7 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Lilly Green		Date of Public Distribution/Dissemination 11 22 2014
	Mailing Address 205 Medallion Circle		Amount
	City State	Zip Code	40.00
	Shreveport LA	71119	Transaction ID: 338d1d30-14d1-4fca-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 22 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		49.60
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

18

S

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 246 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	
	C C00530766
Check if 24-hour report 48-hour report New report Amend	ds report filed on
Full Name of Payee Lilly Green	Date of Public Distribution/Dissemination
	11 22 2014
Mailing Address 205 Medallion Circle	Amount
City State Zip Code	50.10
Shreveport LA 71119	Transaction ID: d70eeb24-5fa9-4607-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type	002 M 11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Sup	port Office Sought: House District: 00
Ms. Mary L Landrieu Opp	
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General
Per Election for Office Sought	Other (specify) Runoff
Full Name of Payee Jerome M Weil	Date of Public Distribution/Dissemination
Mailing Address 101 Durham Drive	11 23 2014
	Amount
City State Zip Code	15.00
Lafayette LA 70508	Transaction ID : 4dc42328-b778-4b48-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	001 11 / 23 / 2014
Name of Federal Candidate Sup	pport Office Sought: House District: 00
Ma Marrel Landress	pose President X Senate State: LA
Calendar Year-To-Date	Disbursement For: Primary General 2014
Per Election for Office Sought 554635.78	Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	65.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein with, or at the request or suggestion of, any candidate or authorized committee or a party committee) any political party committee or its agent.	

[Electronically Filed]

05

Date

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PAGE	247	OF	320
FOR L	INE 24	OF F	ORM 3X

				FOR LINE 2	4 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION	ON NUMBER ▼
Women Speak Out PAC				C C00530766	
Check if 24-hour report 48-hour	report New report	ort Amends repo		M = M / D = D /	Y = Y = Y = Y
Full Name of Payee			Date	of Public Distribution/	Dissemination
Jerome M Weil Mailing Address 404 Durkers Drive			[11 / 23	2014
101 Durham Drive			Amo	unt	
City	State	Zip Code			3.00
Lafayette	LA	70508		action ID : cba9ee6f-7 of Disbursement or C	
Purpose of Expenditure Mileage		Category/ Type 002] [11 23	2014
Name of Federal Candidate		Support	Office Soug	ht: House	District:00
Ms. Mary L Landrieu		X Oppose	Presid		State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	nt For: Primary Other (specify) ▶	General Runoff
Full Name of Payee Gregory Green	<u> </u>			of Public Distribution	/Dissemination
Mailing Address 2506 Bolch Street			Amo	11 22 unt	2014
City	State	Zip Code			60.00
Shreveport	LA	71104		action ID: c1085611- of Disbursement or C	
Purpose of Expenditure Salary		Category/ Type 001		11 22 /	2014
Name of Federal Candidate		Support	Office Soug	ht: House	District:00
Ms. Mary L Landrieu		Oppose	Presid	dent Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	nt For: Primary Other (specify) ▶	General Runoff
(a) SUBTOTAL of Itemized Independent	Expenditures				63.00
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		· -	7 7	
(c) TOTAL Independent Expenditures			•	7 1 7	
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized				
Ms. Emily Buchanan	[Electroni	cally Filed] Date	, 05 /	18 / Y Y 201	5
Signature		_			

	age# 15951393357 CHEDULE E (FEC Form 3)	()		
	EMIZED INDEPENDENT EXPEND			PAGE 248 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC			C C00530766
 Ch	neck if 24-hour report 48-hour re	eport New rep	ort Amends repo	ort filed on
_	Full Name of Payee			
	Gregory Green			Date of Public Distribution/Dissemination
	Mailing Address 2506 Bolch Street			11 22 2014
				Amount
	City	State	Zip Code	54.60
	Shreveport	LA	71104	Transaction ID: fe2b9351-f8f0-47d9-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	11 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee Bobbie M Steinsholt			Date of Public Distribution/Dissemination
	Mailing Address 3009 Skelly St			Amount
	City	State	Zip Code	80.00
	Shreveport	LA	71107	Transaction ID : e7f1c715-8595-4cdf-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	11 D 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	,,	554635.78	Disbursement For: Primary General 2014 Runoff
	(a) SUBTOTAL of Itemized Independent E	Evpandituras		. 134.60
	(a) SOBTOTAL OF REMIZED INDEPENDENT L	-xperialtures		134.00
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		•
	(c) TOTAL Independent Expenditures			•

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	/ 18	2015
Signature					

PAGE 249 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M
of Public Distribution/Dissemination
11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt
80.00
oction ID : 82ac06f2-1bc0-44fa-b of Disbursement or Obligation
11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) ▶Runoff
of Public Distribution/Dissemination
11 22 7 2014
ınt
15.90
action ID: e2687fcd-71ac-4b37-b of Disbursement or Obligation
11 / 22 / 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) Runoff
95.90
00.00

NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
				M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed o	n
Full Name of Payee Maegan E McDaniel				Date of Public Distribution/Dissemination
				11 22 2014
Mailing Address 3009 Skelly St				Amount
City	State	Zip Code		80.00
Shreveport	LA	71107		ransaction ID : 82ac06f2-1bc0-44fa-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 22 2014
Name of Federal Candidate		Cupport	Office S	Sought: House District: 00
Ms. Mary L Landrieu		Support Oppose		President X Senate State: LA
Calendar Year-To-Date		'		sement For: Primary General
Per Election for Office Sought		554635.78	2014	Other (specify) ►Runoff
Full Name of Payee				Date of Public Distribution/Dissemination
Maegan E McDaniel				11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3009 Skelly St				Amount
City	State	Zip Code		15.90
Shreveport	LA	71107		ransaction ID : e2687fcd-71ac-4b37-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 22 7 2014
Name of Federal Candidate		Support	Office	Sought: House District: 00
Ms. Mary L Landrieu		Oppose	F	President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburs 2014	sement For: Primary General X Other (specify) ► Runoff
	, , , , , , ,		ļ .	X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expendi	tures			95.90
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Ms. Emily Buchanan	[Electron	ically Filed]	05	18 2015
Signature		Date		التتالتا

PAGE	250	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report fi	filed on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Cynthia N Schmit	11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2226 Taft Circle Apt 1	Amount
City State Zip Code	50.00
Winchester VA 22601	Transaction ID: 00b35d48-d929-4741-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support O	office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Odiolidai Icai lo Dato	old Sister of the control of the co
E HALL (D	Other (speerly) F
Full Name of Payee Windy Hageman	Date of Public Distribution/Dissemination 11 22 2014
Mailing Address 5521 Randolph St.	Amount
City State Zip Code	30.00
Marrero LA 70072	Transaction ID: e5aa9a40-cbad-42f0-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 22 2014
Name of Federal Candidate Support O	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
	Disbursement For: Primary General Other (specify) ■ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	80.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(C) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Signature

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	SCHEDULE E (FEC Form 3X)				
TE	EMIZED INDEPENDENT EXPENDITURES			PAGE 251 OF 320 FOR LINE 24 OF FORM 3X	
	AME OF COMMITTEE (In Full)		FEG	C IDENTIFICATION NUMBER ▼	
٧	Vomen Speak Out PAC		С	C00530766	
_ Ch	neck if 24-hour report 48-hour report New report	rt Amends repor	t filed on	/ D D / Y Y Y Y	
_	Full Name of Payee Windy Hageman		Date of Pu	ublic Distribution/Dissemination	
	Mailing Address 5521 Randolph St.		Amount	التنا لتنا	
	City State Z	Zip Code	-	2.70	
	Marrero LA 7	70072		n ID : e60c462c-2e6f-4cc5-9 isbursement or Obligation	
	Purpose of Expenditure Mileage	Category/ Type 002	M M M	22 / 2014	
	Name of Federal Candidate	Support	Office Sought:	House District:00	
	Ms. Mary L Landrieu	X Oppose	President	Senate State: LA	
	Calendar Year-To-Date Per Election for Office Sought		Disbursement Fo 2014 Other	r: Primary General (specify) ► Runoff	
	Full Name of Payee Sheri J Peace		Date of P	ublic Distribution/Dissemination	
	Mailing Address 9685 Paula St		Amount		
	City State Z	Zip Code		80.00	
		71047		in ID : 9555e0b8-cbac-40dd-8 disbursement or Obligation	
	Purpose of Expenditure Salary	Category/ Type 001	M 11		
	Name of Federal Candidate	Support	Office Sought:	House District:00	
	Ms. Mary L Landrieu	Oppose	President	Senate State: LA	
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For 2014	or:	
_	(a) SUBTOTAL of Itemized Independent Expenditures		·	82.70	
	(b) SUBTOTAL of Unitemized Independent Expenditures		·	7 7 4	
	(c) TOTAL Independent Expenditures		•	7 7 7	
	Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized of party committee) any political party committee or its agent.				
	Ms Emily Ruchanan				

[Electronically Filed]

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Date

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Signature

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	SCHEDULE E (FEC Form 3X)				
Γı	EMIZED INDEPENDENT EXPENDITURES		PAGE 252 OF 320 FOR LINE 24 OF FORM 3X		
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
۷	Nomen Speak Out PAC		C C00530766		
_ Cł	heck if 24-hour report 48-hour report New report	rt Amends repor	rt filed on		
_	Full Name of Payee		Date of Public Distribution/Dissemination		
	Sheri J Peace		11 / 22 / 2014		
	Mailing Address 9685 Paula St		Amount		
	City State Z	Zip Code	27.60		
	Keithville LA 7	71047	Transaction ID : 315ba223-f971-4bab-b Date of Disbursement or Obligation		
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 / 2014		
	Name of Federal Candidate	Support	Office Sought: House District: 00		
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA		
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:		
	Full Name of Payee Michael B Fuhrmann		Date of Public Distribution/Dissemination 11 22 2014		
	Mailing Address 329 Columbia St		Amount		
	City State Z	Zip Code	10.00		
	Shreveport LA 7	71104	Transaction ID : 7ed82aa2-00ba-4344-8 Date of Disbursement or Obligation		
	Purpose of Expenditure Salary	Category/ Type 001	11 22 2014		
	Name of Federal Candidate	Support	Office Sought: House District: 00		
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA		
-	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014		
	(a) SUBTOTAL of Itemized Independent Expenditures		37.60		
	(b) SUBTOTAL of Unitemized Independent Expenditures		•		
_	(c) TOTAL Independent Expenditures				
-	Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.				
	Ms. Emily Buchanan		M M / D D / Y Y Y		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 253 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	port Amends repo	ort filed on
	Full Name of Payee Michael B Fuhrmann		Date of Public Distribution/Dissemination 11 22 2014
	Mailing Address 329 Columbia St		11 22 2014 Amount
	City State Shreveport LA	Zip Code 71104	Transaction ID : e6c27ad6-c2d4-4444-9 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee ERIC TABARY Mailing Address 6101 NORA ST		Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Amount Amount
	City State	Zip Code	55.00
	METAIRIE LA	70003	Transaction ID : c62f6b14-2db3-4caa-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 22 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		> 56.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		-
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Ms. Emily Buchanan

Signature

3(CHEDULE E (FEC Form 3X)		
ΓΙ	EMIZED INDEPENDENT EXPENDITURES		PAGE 254 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
			C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee ERIC TABARY		Date of Public Distribution/Dissemination
	LINO IABAIN		11 / 22 / Y Y Y Y Y
	Mailing Address 6101 NORA ST		Amount
	City State	Zip Code	1.80
	METAIRIE LA	70003	Transaction ID : 43e70cb8-93e9-4e5e-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee		Date of Public Distribution/Dissemination
	Aaron R Cowart		M M / D D / Y Y Y Y
	Mailing Address 184 South Military Rd		
	10 / 33dd Mindaly Fid		Amount
	City State	Zip Code	40.00
	Slidell LA	70458	Transaction ID: 78631401-9e53-403b-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 23 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	∑ Oppose	
	<u> </u>	Д оррозс	President State.
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 41.80
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	/ ·		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)			
TΕ	EMIZED INDEPENDENT EXPENDITURES			PAGE 255 OF 320 FOR LINE 24 OF FORM 3X
V/	ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC			C C00530766
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed or	n
	Full Name of Payee Aaron R Cowart]	Date of Public Distribution/Dissemination
	Mailing Address 184 South Military Rd			11 23 2014
	,		/	Amount
	City State	Zip Code		13.50
	Slidell LA	70458		ransaction ID: 3ed5bc8b-3834-42fe-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002		11 23 / 2014
	Name of Federal Candidate	Support	Office S	Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ement For:
	Full Name of Payee Gregory Green			Date of Public Distribution/Dissemination
				11 23 2014
	Mailing Address 2506 Bolch Street		,	Amount
	City State	Zip Code		20.00
	Shreveport LA	71104		ransaction ID : fd69cb8d-662a-4f82-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001		11 23 / 2014
	Name of Federal Candidate	Support	Office S	Sought: House District: 00
	Ms. Mary L Landrieu	Oppose		President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	2014	ement For: Primary General Other (specify) ► Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures			33.50
	(4) 002 10 112 or normalist mapped as it is permitted as it is in the contract of the contract			7 7 7
	(b) SUBTOTAL of Unitemized Independent Expenditures			
_	(c) TOTAL Independent Expenditures		·· •	
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			

[Electronically Filed]

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	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES		PAGE 256 OF 320
1 6	EMIZED INDEPENDENT EXPENDITORES		PAGE 256 OF 320 FOR LINE 24 OF FORM 3X
V/	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC		
	<u>'</u>		C C00530766
Ch	neck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
	Full Name of Payee Gregory Green		Date of Public Distribution/Dissemination
	Mailing Address		11 23 / 2014
	2506 Bolch Street		Amount
	City State	Zip Code	20.10
	Shreveport LA	71104	Transaction ID: c9924f53-bbc8-45d2-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Helen Celestine		Date of Public Distribution/Dissernination
	Mailing Address 38346 Quinn Rd		Amount
		7: 0 1	40.00
	City State Pearl River LA	Zip Code 70452	40.00 Transaction ID: 04de4d1f-f4eb-48b9-8
	Purpose of Expenditure		Date of Disbursement or Obligation
	Salary	Category/ Type 001	11 23 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		60.10
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures	reported herein were	not made in cooperation, consultation, or concert

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 ^M	/	18	/	2015
Signature							

PAGE	257	OF	320 DRM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee Helen Celestine	Date of Public Distribution/Dissemination
Mailing Address	11 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
38346 Quinn Rd	Amount
City State Zip Code	13.50
Pearl River LA 70452	Transaction ID: 955ac0e3-d33c-4180-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 23 7 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary General Other (specify) Runoff
	Ctrici (specify) -
Full Name of Payee Francis Richardson	Date of Public Distribution/Dissemination
Mailing Address 220 Doucet Rd	11 23 2014 Amount
City State Zip Code	30.00
Lafayette LA 70503	Transaction ID: e2f3a207-4f54-482c-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbu 2014	rsement For: Primary General ✓ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	43.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	5 18 2015
Signature	

FOR LINE 24 OF FORM 3X	PAGE	258	OF	320
	FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Francis Richardson	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 Doucet Rd	Amount
City State Zip Code	2.10
Lafayette LA 70503	Transaction ID: 3f8bd0c8-a9aa-44f4-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 23 2014
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary General Nother (specify) ■ Runoff
Full Name of Payee Virginia T Grant	Date of Public Distribution/Dissemination
Mailing Address 134 Shore Crest Circle	11 23 2014 Amount
City State Zip Code	40.00
Carrire MS 39426	Transaction ID: d0932a35-d218-4630-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 23 / 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbrace 2014	ursement For: Primary General Y Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	42.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mouth, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Signature

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	SCHEDULE E (FEC Form 3X)					
Te	EMIZED INDEPENDENT EXPENDITURES		PAGE 259 OF 320 FOR LINE 24 OF FORM 3X			
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
۷	Nomen Speak Out PAC		C C00530766			
_ Cł	heck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on			
_	Full Name of Payee		Date of Public Distribution/Dissemination			
	Virginia T Grant		11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Mailing Address 134 Shore Crest Circle		Amount			
	City State	Zip Code	9.60			
	Carrire MS	39426	Transaction ID : 74aa7656-f227-438f-9 Date of Disbursement or Obligation			
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 2014			
	Name of Federal Candidate	Support	Office Sought: House District: 00			
	Ms. Mary L Landrieu	Oppose	President Senate State: LA			
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff			
	Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination			
	Mailing Address 110 W Pecan St		Amount			
	City State	Zip Code	45.00			
	Ville Platte LA	70586	Transaction ID: 97af6463-f4f7-4315-8 Date of Disbursement or Obligation			
	Purpose of Expenditure Salary	Category/ Type 001	11 23 2014			
	Name of Federal Candidate	Support	Office Sought: House District:00			
	Ms. Mary L Landrieu	Oppose	President Senate State: LA			
_	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:			
	(a) SUBTOTAL of Itemized Independent Expenditures		> 54.60			
	(b) SUBTOTAL of Unitemized Independent Expenditures		- •			
	(c) TOTAL Independent Expenditures		. •			
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
	Ms. Emily Buchanan		M M / D D / Y Y Y			

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
IE	EMIZED INDEPENDENT EXPENDITURES		PAGE 260 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New re	port Amends repo	ort filed on
	Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination 11 23 2014
	Mailing Address 110 W Pecan St		Amount
	City State Ville Platte LA	Zip Code 70586	31.50 Transaction ID : 18b0df08-10c8-4fb4-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Jessica R Resendiz Mailing Address 9685 Paula St		Date of Public Distribution/Dissemination M M M / 23 / 2014 Amount
	City State	Zip Code	80.00
	Keithville LA	71047	Transaction ID: 407d41f8-25c6-49de-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	M 11 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 111.50
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Date

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Signature

TEMIZED INDEPENDENT EXPENDITURES		PAGE 261 OF 320			
		FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Women Speak Out PAC		C C00530766			
Check if 24-hour report 48-hour report New report	ort Amends report filed	on M = M / D = D / Y = Y = Y			
Full Name of Payee Jessica R Resendiz		Date of Public Distribution/Dissemination			
Mailing Address 9685 Paula St		11 23 2014 Amount			
I *	Zip Code	25.80			
Keithville LA	71047	Transaction ID: 04f02876-0b67-4dd4-8 Date of Disbursement or Obligation			
Purpose of Expenditure Mileage	Category/ Type 002	11 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Office	Sought: House District: 00			
Ms. Mary L Landrieu	X Oppose	President State: LA			
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disbu 2014	rsement For:			
Full Name of Payee Mary Frank Mailing Address 14 Damblaured Drive		Date of Public Distribution/Dissemination 11 23 2014			
14 Ramblewood Drive		Amount			
City State	Zip Code	15.00			
Covington LA	70435	Transaction ID: f7f5bb0d-7c34-46d8-a Date of Disbursement or Obligation			
Purpose of Expenditure Salary	Category/ Type 001	11 23 / 2014			
Name of Federal Candidate	Support Office	Sought: House District: 00			
Ms. Mary L Landrieu	X Oppose	President State: LA			
Calendar Year-To-Date Per Election for Office Sought	554635.78 Disbu 2014	rsement For:			
(a) SUBTOTAL of Itemized Independent Expenditures	>	40.80			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	>				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
Ms. Emily Buchanan [Electroni	cally Filed] Date 05	5 18 2015			

PAGE	262	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report	t filed on MMM / DDD / YTYTY
Full Name of Payee	Date of Public Distribution/Dissemination
Mary Frank Mailing Address 44 Barklaured Brite	11 23 / 2014
14 Ramblewood Drive	Amount
City State Zip Code	5.40
Covington LA 70435	Transaction ID: 7fe7338e-4a7d-499d-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Odichadi redi 10 Bate	Disbursement For: Primary General 2014 Runoff
Full Name of Payee	
Patricia F Arnold	Date of Public Distribution/Dissemination 11 23 2014
Mailing Address 1117 Clipper Dr	Amount
City State Zip Code	52.00
Slidell LA 70458	Transaction ID : ba288d85-68eb-4fcc-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 23 2014
Name of Federal Candidate Support	Office Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.78	Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	57.40
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES	PAGE 263 OF 320
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X
Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼
Tromon opean out. Ac	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed of	on Mam / Dab / Yayayay
Full Name of Payee Patricia F Arnold	Date of Public Distribution/Dissemination
Mailing Address 1117 Clipper Dr	Amount
City State Zip Code	9.30
	ransaction ID : 722d8ffc-91e1-4815-a
Purpose of Expenditure Mileage Category/ Type 002	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	Sought: House District: 00
Ms Mary I Landriau	President X Senate State: LA
554635.78 2014	sement For:
Full Name of Payee Jeanne Tribou	Date of Public Distribution/Dissemination
Mailing Address	11 23 2014
22369 Ponderosa Dr.	Amount
City State Zip Code	40.00
Waldeville 2. To IT I	Fransaction ID: d8085d48-a62d-4b1e-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 23 / 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures	49.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	•
Ms. Emily Buchanan [Electronically Filed] Date 05	

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)					
EMIZED INDEPENDENT EXPENDI	TURES			PAGE 264 FOR LINE 24	OF 320 4 OF FORM 3X
AME OF COMMITTEE (In Full)				FEC IDENTIFICATIO	N NUMBER ▼
Nomen Speak Out PAC				C C00530766	
heck if 24-hour report 48-hour re	eport New repo	ort Amends repo		1 M / D D /	Y Y Y
Full Name of Payee Jeanne Tribou				of Public Distribution/D	Y = Y = Y = Y
Mailing Address 22369 Ponderosa Dr.			Amou	11 23 Int	2014
City	State	Zip Code			15.60
Mandeville	LA	70471		action ID : 2e005644-7 of Disbursement or Ob	af9-4b0c-a
Purpose of Expenditure Mileage		Category/ Type 002		11 23	2014
Name of Federal Candidate		Support	Office Sough	nt: House D	District: 00
Ms. Mary L Landrieu		Oppose	Preside	ent X Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemen 2014 X O	nt For: Primary Other (specify) ▶	General Runoff
Full Name of Payee Jennifer F Gilbert Mailing Address 180 McNeil Steep Hollow	r Rd			of Public Distribution/E	Dissemination 2014
City	State	Zip Code	-		50.00
Carriere	MS	39426		action ID : 661c4737-7 of Disbursement or O	
Purpose of Expenditure Salary		Category/ Type 001		11 23	2014
Name of Federal Candidate		Support	Office Sough	nt: House D	District:00
Ms. Mary L Landrieu		X Oppose	Preside	lent Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014	nt For: Primary Other (specify) ▶	General Runoff
(a) SUBTOTAL of Itemized Independent Extended (b) SUBTOTAL of Unitemized Independent (c) TOTAL Independent Expenditures	Expenditures		· [:		65.60
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	y candidate or authorized				

[Electronically Filed]

05

Date

18

S IT

Ms. Emily Buchanan

Signature

CHEDULE E (FEC Form 3X)					
EMIZED INDEPENDENT EXPENDITURES		PAGE 265 OF 320 FOR LINE 24 OF FORM 3X			
AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
Women Speak Out PAC					
·		C C00530766			
heck if 24-hour report 48-hour report New report	ort Amends report	i filed on			
Full Name of Payee Jennifer F Gilbert		Date of Public Distribution/Dissemination			
Mailing Address 180 McNoil Stoop Hollow Pd		11 23 2014			
180 McNeil Steep Hollow Rd		Amount			
City State	Zip Code	44.70			
Carriere MS	39426	Transaction ID : d3fc9ba0-6f00-42e5-9 Date of Disbursement or Obligation			
Purpose of Expenditure Mileage	Category/ Type 002	11 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support	Office Sought: House District: 00			
Ms. Mary L Landrieu	X Oppose	President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014			
		Other (specify) ▶ Runoff			
Full Name of Payee Zachary Vidrine		Date of Public Distribution/Dissemination			
Mailing Address		11 23 / 2014			
202 Rue Des Cajun		Amount			
City State	Zip Code	30.00			
Ville Platte LA	70586	Transaction ID: 524417e4-5653-4c1c-a Date of Disbursement or Obligation			
Purpose of Expenditure Salary	Category/ Type 001	11 23 / 2014			
Name of Federal Candidate	Support	Office Sought: House District: 00			
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA			
Calendar Year-To-Date		Disbursement For: Primary General			
Per Election for Office Sought	554635.78	2014			
(a) SUBTOTAL of Itemized Independent Expenditures		74.70			
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures		·			
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 266 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Ch	neck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on
	Full Name of Payee Zachary Vidrine		Date of Public Distribution/Dissemination 11 23 2014
	Mailing Address 202 Rue Des Cajun		11 23 2014 Amount
	City State Ville Platte LA	Zip Code 70586	10.80 Transaction ID : 3544028b-fabf-4f8c-a
	Purpose of Expenditure Mileage	Category/ Type 002	Date of Disbursement or Obligation 11 23 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Ryan Drake Mailing Address 29637 Park St		Date of Public Distribution/Dissemination 11 23 2014 Amount
	City State Walker LA	Zip Code	20.00 Transaction ID: ec83392f-8fff-4f03-8
	Purpose of Expenditure Salary	Category/	Date of Disbursement or Obligation
	Name of Federal Candidate	Туре	
	Ms. Mary L Landrieu	Support Oppose	Office Sought: House District: 00 President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		> 30.80
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Date

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Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 267 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New	report Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Ryan Drake		11 23 / 2014
	Mailing Address 29637 Park St		Amount
	City State	Zip Code	2.40
	Walker LA	70785	Transaction ID : 353f7550-d540-41c8-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		
	Ms. Mary L Landrieu	Support	Office Sought: House District: 00
	ivis. ivialy E caranea	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Other (specify) ► Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Cynthia N Schmit		11 23 2014
	Mailing Address 2226 Taft Circle Apt 1		Amount
	City State	Zip Code	15.00
	Winchester VA	22601	Transaction ID : 6e2f3351-129f-4d3c-a
			Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 23 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date	FF 400 F 70	Disbursement For: Primary General 2014
	Per Election for Office Sought	554635.78	Other (specify) Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 17.40
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		•
	Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authoriparty committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
I E	EMIZED INDEPENDENT EXPENDITURES		PAGE 268 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Ch	eck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on M M / D D / Y Y Y Y Y
	Full Name of Payee Theresa a Youngblood		Date of Public Distribution/Dissemination
	Mailing Address 102 S Main Street Apt A2		Amount
	City State Berryville VA	Zip Code 22611	110.00 Transaction ID: 6e4972dc-29b7-4cf4-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	M M / D D / Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
	Full Name of Payee Michael Vidrine Mailing Address 1103 West Wilson Street		Date of Public Distribution/Dissemination 11 23 2014 Amount
	City State	Zip Code	70.00
	Ville Platte LA	70586	Transaction ID : 23b4486f-35d1-41a1-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	M M / D D / Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 180.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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TI	EMIZED INDEPENDENT EXPENDITURES		PAGE 269 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Women Speak Out PAC		C C00530766
Cł	check if 24-hour report 48-hour report New report	t Amends report	t filed on Man / Dab / Yayayay
	Full Name of Payee		Date of Public Distribution/Dissemination
	Michael Vidrine		11 23 Y Y Y Y Y
	Mailing Address 1103 West Wilson Street		Amount
	City State Zip	ip Code	21.30
	1 '	70586	Transaction ID : ddd05230-9a39-4961-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Joneisha Stewart		11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2329 Runnymede Dr		Amount
	City State Zi	Zip Code	40.00
		70072	Transaction ID: b3a15e9c-13d8-47e1-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 23 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	<u>, </u>		
	(a) SUBTOTAL of Itemized Independent Expenditures		61.30
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		·
	Under penalty of perjury I certify that the independent expenditures require, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
	Ms. Emily Buchanan [Electronical	ally Filed] Date	05 18 2015
	Signature	Date	

Signature

Ms. Emily Buchanan

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FEMIZED INDEPENDENT EXPENDITUR	iLO		PAGE 270 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour report	New re	port Amends repo	ort filed on
Full Name of Payee Joneisha Stewart			Date of Public Distribution/Dissemination
Mailing Address 2329 Runnymede Dr			11 23 2014 Amount
City	State	Zip Code	9.60
Marrero	LA	70072	Transaction ID : 6e01c837-6fb7-4960-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
Full Name of Payee			Date of Public Distribution/Dissemination
Christine Stevens			11 23 2014
Mailing Address 100 Asbury Ct			Amount
City	State	Zip Code	30.00
Winchester	VA	22602	Transaction ID : 3aecc20c-df83-4dad-b Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 23 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expen	ditures		
(-)			7 7 7
(b) SUBTOTAL of Unitemized Independent Exp	enditures		
(c) TOTAL Independent Expenditures			•
	ndidate or authorize		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political

[Electronically Filed]

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Date

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PAGE	271	OF	320
FOR L	INE 24	OF F	320 ORM 3X

				FOR LINE 2	24 OF FORM 3X
	COMMITTEE (In Full)			FEC IDENTIFICATION	ON NUMBER ▼
Wome	en Speak Out PAC			C C00530766	
Check if	24-hour report 48-hour report New report	ort Amends repo		M = M / D = D /	Y Y Y Y
	ame of Payee		Date	e of Public Distribution/	/Dissemination
	g Address 400 ACRUDY CT		[11 / 23	2014
Wallin	100 ASBURY CT		Amo	unt	
City	State	Zip Code			30.00
	HESTER VA	22602		saction ID: 0e0d89fe-9 e of Disbursement or C	
Purpo Salar	se of Expenditure y	Category/ Type 001		11 23	2014
Name	of Federal Candidate	Support	Office Soug	ght: House	District:00
Ms. M	flary L Landrieu	X Oppose	Presid	dent Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disburseme	ent For: Primary Other (specify) ▶	General Runoff
	lame of Payee n E Conner			e of Public Distribution	Y = Y = Y
Mailin	g Address 100 Asbury Ct		Amo	11 23 ount	2014
City	State	Zip Code			30.00
	hester VA	22602		saction ID: 15c6a7d1- e of Disbursement or C	
Purpo Salar	se of Expenditure y	Category/ Type 001		11 / 23	2014
Name	of Federal Candidate	Support	Office Soug	ght: House	District:00
Ms. N	Mary L Landrieu	Oppose	Presi	dent Senate	State:LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disburseme 2014	ent For: Primary Other (specify) ►	General Runoff
(a) SU	BTOTAL of Itemized Independent Expenditures		· [60.00
(b) SU	BTOTAL of Unitemized Independent Expenditures		· [
(c) TO	TAL Independent Expenditures		• [7 1 7	
with, or	penalty of perjury I certify that the independent expenditures r at the request or suggestion of, any candidate or authorized ommittee) any political party committee or its agent.				
	Ms. Emily Buchanan [Electron.	ically Filed] Date	05 /	18 / 201	5
Sign	nature				

PAGE	272	OF	320 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Rodney O Culbreath	11 23 / Y Y Y Y Y Y
Mailing Address 100 Asbury Ct	Amount
City State Zip Code	30.00
	Transaction ID : 593d8b12-7857-4e7c-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 23 7 2014
Name of Federal Candidate Support Office	Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For:
Full Name of Payee Rodney D Culbreth Mailing Address 100 Asbury CT	Date of Public Distribution/Dissemination 11 23 2014 Amount
3200 Dam Neck Rd	20.00
City State Zip Code Winchester VA 22602	30.00 Transaction ID: 522cc174-f81a-4fee-b
Purpose of Expenditure Salary Category/ Type 001	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	Sought: House District:00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbu 2014	rrsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	60.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mawith, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date 05	5 18 2015
Signature	

PAGE 273 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
/ D = D / Y = Y = Y
of Public Distribution/Dissemination
30.00 action ID : 6c56a702-5fd0-497d-8
of Disbursement or Obligation 11 23 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
other (specify) ▶Runoff
of Public Distribution/Dissemination
60.00
oction ID : e90bc2eb-f976-4a45-a of Disbursement or Obligation
11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
nt: House District:00
ent X Senate State: LA
nt For: Primary General
Other (specify) P Runoff
90.00

Mamon Speek Out DAC		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report N	ew report Amends report f	iled on M M / D D / Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Rze Culbreath		11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 100 Asbury Ct		Amount
City State	Zip Code	30.00
Winchester VA	22602	Transaction ID : 6c56a702-5fd0-497d-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 23 2014
Name of Federal Candidate	Support O	ffice Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: ☐ Primary ☐ General Other (specify) ► Runoff
Full Name of Payee Brieshauna M Stevens		Date of Public Distribution/Dissemination
Mailing Address 1703 Torrey Pines Ct		Amount
City State	Zip Code	60.00
Reston VA	20190	Transaction ID: e90bc2eb-f976-4a45-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support C	office Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary General O14 Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		90.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expen with, or at the request or suggestion of, any candidate or aut party committee) any political party committee or its agent.		
Ms. Emily Buchanan	Electronically Filed] Date	05 18 2015
Signature		

NAME OF COMMITTEE (In Full)

	PAGE 274 FOR LINE	4 OF 320 24 OF FORM 3X
FEC IDE	NTIFICAT	ON NUMBER ▼
\sim	00530766	
- M /	D D /	Y Y Y Y Y Y
of Public	Distributio	n/Dissemination
11 /	23	2014
nt		
ction ID :	05c76158	70.00 3-701f-4fe5-9
of Disburs		Obligation
11	23	2014
it:	House	District:00
ent X	Senate	State: LA
t For:	Primar	ry General
ther (spec	cify) 🕨	Runoff
		n/Dissemination
11 /	23	2014
ınt		
		2.10
		d-90d8-4e16-a Obligation
11 /	23	2014
nt:	House	District:00
ent X	Senate	State: LA
nt For:	Prima	ry General
ther (spe	cify) 🕨	Runoff
-7-		72.10

Women Speak Out PAC			C C00530766
Check if 24-hour report 48-hour	eport New repo	ort Amends repo	rt filed on
Full Name of Payee			Date of Public Distribution/Dissemination
ERIC TABARY			11 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6101 NORA ST			Amount
City	State	Zip Code	70.00
METAIRIE	LA	70003	Transaction ID: 05c76158-701f-4fe5-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 23 / Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
Full Name of Payee			Date of Public Distribution/Dissemination
ERIC TABARY			11 23 2014
Mailing Address 6101 NORA ST			Amount
City	State	Zip Code	2.10
METAIRIE	LA	70003	Transaction ID : 7e4e46bd-90d8-4e16-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 23 7 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent I	Expenditures		72.10
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		·
(c) TOTAL Independent Expenditures			•
	ny candidate or authorized		not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political
Ms. Emily Buchanan	[Electron	ically Filed]	05 18 2015
Signature	-	Date	

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	age# 15951393384				
	CHEDULE E (FEC Form 3 EMIZED INDEPENDENT EXPEN			ı	PAGE 275 OF 320
_	INIZED INDEFENDENT EXPER	DITUNES			FOR LINE 24 OF FORM 3X
۱A	ME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC				
				C	000530766
Ch	eck if 24-hour report 48-hour	r report New re	port Amends repo	ort filed on	D = D / Y = Y = Y
٦	Full Name of Payee Warren Gravois			Date of Public	Distribution/Dissemination
	Wallell Glavois			11 /	23 / 2014
	Mailing Address 16005 7th St			Amount	
	City	State	Zip Code		20.00
	Pearlington	MS	39572		: 0cf6a8fb-20af-4601-8 rsement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	11 /	23 / 2014
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Ms. Mary L Landrieu		Oppose	President	Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: 2014 Other (sp	Primary General ecify) ▶ Runoff
	Full Name of Payee			Date of Public	Distribution/Dissemination
	Warren Gravois			/ 11	23 2014
	Mailing Address 16005 7th St			Amount	
	City	State	Zip Code		1.50
	Pearlington	MS	39572		: 9868800e-1563-472d-b rsement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	Date of Bisbu	23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Cumport	Office Cought	House District: 00
	Ms. Mary L Landrieu		Support	Office Sought:	Tiouse District.
			Oppose	President	Seriale State.
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: 2014 Other (sp	Primary General ecify) ► Runoff
	(a) SUBTOTAL of Itemized Independent	Expenditures		• •	21.50
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures			• • • • • • • • • • • • • • • • • • • •
	'	·		7	4
	(c) TOTAL Independent Expenditures			•	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05 M	18	2015
Signature					

Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

HEDULE E (FEC Form 3X) MIZED INDEPENDENT EXPENDIT	JRES		PAGE 276 OF 320 FOR LINE 24 OF FORM 3>
IE OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC			C C00530766
ck if 24-hour report 48-hour repo	ort New	report Amends report fil	led on Mam / Dab / Yayayay
ull Name of Payee			Date of Public Distribution/Dissemination
Mary Frank			11 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 14 Ramblewood Drive			Amount
City	State	Zip Code	15.00
Covington	LA	70435	Transaction ID: b734e21f-ee9f-480a-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
lame of Federal Candidate		Support Of	ffice Sought: House District: 00
/Is. Mary L Landrieu		X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought			sbursement For: Primary General 114
Full Name of Payee Mary Frank			Date of Public Distribution/Dissemination
Mailing Address 14 Ramblewood Drive			11 22 2014 Amount
Dity	State	Zip Code	1.56
Covington	LA	70435	Transaction ID: 568e93cc-e1a9-4178-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 22 / Y Y Y Y Y 2014
Name of Federal Candidate		Support Of	ffice Sought: House District: 00
		Oppose	President X Senate State: LA
Ms. Mary L Landrieu		∑ oppose	Tresident Cenate State:

(c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 2015 05 18 Date

PAGE		OF	
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New r	report Amends report fil	ed on Man / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Zachary Vidrine Mailing Address		11 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
202 Rue Des Cajun		Amount
City State	Zip Code	50.00
Ville Platte LA	70586	Transaction ID: 537f5ead-7160-45a3-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	fice Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis	sbursement For: Primary General 14
Full Name of Payee	,	
Zachary Vidrine		Date of Public Distribution/Dissemination
Mailing Address 202 Rue Des Cajun		Amount
City State	Zip Code	15.60
Ville Platte LA	70586	Transaction ID: 50e02fdf-6591-4884-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 22 / 2014
Name of Federal Candidate	Support Of	fice Sought: House District:00
Ms. Mary L Landrieu	∑ Oppose [President State: LA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General 114 Other (specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	65.60
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	·····	1 9 1 9 1
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electr	ronically Filed]	05 18 2015
Signature		

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE 27 FOR LINE		
FEC ID	ENTIFICAT	ION NUM	IBER ▼
	00530766		
ed on /	D D	Y	YYY
Date of Public	Distributio	n/Dissemi	nation
11 /	22		14
Amount			
			10.00
Transaction ID Date of Disbur	: 43c8a80	3-861e-48	
11 /		/ Y Y	
ce Sought:	House	District:	00
President X	_ Z1	State:	
bursement For:	Prima		General
4 X Other (spe		Rund	off
Date of Public	Distributio	n/Dissemi	nation
/	22)14
Amount			
		1	3.50
Transaction ID Date of Disbur			
11 /	22	2	014
ce Sought:	House	District:	00
President >	Senate	State:	LA
bursement For:	Prima	ry	General
Other (spe	ecify)	Run	off
1		53.	50
	7		
7			

Women Speak Out PAC Check if 24-hour report 48-hour report New report Amends report file Full Name of Payee **Debra Lindsey** Mailing Address 119 Goldenwood Dr City State Zip Code LA Slidell 70461 Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Offi Ms. Mary L Landrieu Oppose Dis Calendar Year-To-Date 201 554635.78 Per Election for Office Sought Full Name of Payee Debra Lindsey Mailing Address 119 Goldenwood Dr City State Zip Code Slidell LA 70461 Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support Off Ms. Mary L Landrieu Oppose Dis Calendar Year-To-Date 554635.78 20 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

TEMIZED INDEPENDENT EXPENDITUR	ies				GE 279 OF 320 R LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDEN	TIFICATION NUMBER ▼
Women Speak Out PAC				C C008	530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D)
Full Name of Payee			Date	e of Public Dis	stribution/Dissemination
Laura U Logie				M M / D	24 / 2014
Mailing Address 2565 Shire Circle			Amo	ount	
City	State	Zip Code	$ \Gamma$		40.00
Harrisonburg	VA	22801			c4d5e2d-4f7c-45d6-8 ment or Obligation
Purpose of Expenditure Salary		Category/ Type 001			24 2014
Name of Federal Candidate		Support	Office Soug	ght: F	House District: 00
Ms. Mary L Landrieu		Oppose	l `		Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	ent For: Other (specify	Primary General y) ▶ Runoff
Full Name of Payee Nicholas O Wilcox				e of Public Dis	stribution/Dissemination
Mailing Address 1981 Cherokee St			Amo	ount	استا لت
City	State	Zip Code	-		52.00
Baton Rouge	LA	70806			db804f9-19e0-4df0-b ment or Obligation
Purpose of Expenditure Salary		Category/ Type 001			24 / 2014
Name of Federal Candidate		Support	Office Sou	ght: F	House District:00
Ms. Mary L Landrieu		X Oppose	Pres	sident X S	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	ent For: Other (specify	Primary General iy) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expendent	ditures				92.00
•			, <u>–</u>	——————————————————————————————————————	7
(b) SUBTOTAL of Unitemized Independent Expo	enditures		. •	7-	7
(c) TOTAL Independent Expenditures			•	7	7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorized				
Ms. Emily Buchanan	[Electron	nically Filed]	M M M	/ 18 /	2015
Signature		Date	, 03	10	2013

PAGE 280 OF 320 FOR LINE 24 OF FORM 3X
C IDENTIFICATION NUMBER ▼ C00530766
/ D D / Y Y Y Y Y
ublic Distribution/Dissemination
/ 24 / Y Y Y Y Y Y Y
20.00
n ID: 95606519-7dec-4a27-8 pisbursement or Obligation
24 2014

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		
·		C C00530766
Check if 24-hour report 48-hour report New report	ort Amends repor	t filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Krista J Smith		11 24 2014
Mailing Address 41176 Bertville Rd		Amount
City State	Zip Code	20.00
Gonzales LA	70737	Transaction ID: 95606519-7dec-4a27-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014
5 H.M. (D		
Full Name of Payee Krista J Smith		Date of Public Distribution/Dissemination
Mailing Address 41176 Bertville Rd		11 24 2014 Amount
City State	Zip Code	1.23
Gonzales LA	70737	Transaction ID : 3652eed6-92e7-4934-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 24 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		21.23
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	ically Filed] Date	05 18 2015
Signature	_ Date	

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 281 OF 320 FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼ C C00530766 Citiled on M M M / D D / Y Y Y Y Y Y Date of Public Distribution/Dissemination M 1
C C00530766 If filed on
filed on Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination
Date of Public Distribution/Dissemination Mark
Amount 20.00 Transaction ID: 4cc14b66-e349-44fe-b Date of Disbursement or Obligation M M
Amount 20.00 Transaction ID: 4cc14b66-e349-44fe-b Date of Disbursement or Obligation M11
Transaction ID: 4cc14b66-e349-44fe-b Date of Disbursement or Obligation M M M
Transaction ID: 4cc14b66-e349-44fe-b Date of Disbursement or Obligation March Part Par
Transaction ID: 4cc14b66-e349-44fe-b Date of Disbursement or Obligation Mark 24
Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General 2014 Runoff Date of Public Distribution/Dissemination Manual Amount 40.00 Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation Manual Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General 2014
President
Disbursement For: Primary General Other (specify) Runoff Date of Public Distribution/Dissemination M M / 24 / 2014 Amount Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M M / 24 / 2014 Amount Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General
Other (specify) Runoff Date of Public Distribution/Dissemination Amount Amount 40.00 Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation Man
Amount 40.00 Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M M / 24 / 2014 Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General
Amount 40.00 Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M11 24 2014 40.00 Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M11 24 2014 Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General
Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M 11
Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation M 11
Transaction ID: 789c7cfe-0204-4ecf-9 Date of Disbursement or Obligation 11
Office Sought: House District: 00 President Senate State: LA Disbursement For: Primary General 2014
President Senate State: LA Disbursement For: Primary General 2014
Disbursement For: Primary General 2014
2014
- Carlot (opeony)
60.00
7 7
-75 - 75 - 75

Check if 24-hour report 48-hour report New report Amends report Full Name of Payee Noah J Smith Mailing Address 41174 Bertville Rd City State Zip Code LA Gonzales 70737 Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Ms. Mary L Landrieu Oppose Calendar Year-To-Date 554635.78 Per Election for Office Sought Full Name of Payee Tammay Williams Mailing Address 924 N. Prieur St City State Zip Code **New Orleans** LA 70116 Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Ms. Mary L Landrieu Oppose Calendar Year-To-Date 554635.78 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

PAGE 282 FOR LINE 24		320 ORM 3X
DENTIFICATION	NUN	IBER ▼

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New	v report Amends report filed on Amends report filed on
Full Name of Payee Tammay Williams	Date of Public Distribution/Dissemination
,	11 24 Y 2014
Mailing Address 924 N. Prieur St	Amount
City State	Zip Code 9.00
New Orleans LA	70116 Transaction ID : 3d1c359a-609d-4d3c-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002 11 24 2014
Name of Federal Candidate	Support Office Sought: House District:00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
Full Name of Payee Antoinette Franklin	Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 8822 Apple St	Amount
City State	Zip Code 40.00
New Orleans LA	70188 Transaction ID : 17c8ba71-cb70-4973-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001 11 24 2014
Name of Federal Candidate	Support Office Sought: House District:00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	49.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
	tures reported herein were not made in cooperation, consultation, or concert orized committee or agent of either, or (if the reporting entity is not a political
Ms. Emily Buchanan [Ele	ctronically Filed] Date 05 18 2015
Signature	

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Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 283 OF 320 FOR LINE 24 OF FORM 3X
V/	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
	Vomen Speak Out PAC		
			C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee Antoinette Franklin		Date of Public Distribution/Dissemination
	Antonette Franklin		11 / 24 / 2014
	Mailing Address 8822 Apple St		Amount
	City State	Zip Code	9.00
	New Orleans LA	70188	Transaction ID : c79e59b4-cafc-4217-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee		Date of Public Distribution/Dissemination
	Heather A Smith		11 24 2014
	Mailing Address 995 Clairborne Rd		
			Amount
	City State	Zip Code	37.00
	Calhoun LA	71225	Transaction ID : a471bbf1-9782-4a17-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 46.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •
	(c) TOTAL Independent Expenditures		
	(5) 15 The mappingon Experience		7 7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 284 OF 320
			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC		C C00530766
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repor	rt filed on
	Full Name of Payee Heather A Smith		Date of Public Distribution/Dissemination
	Mailing Address 995 Clairborne Rd		Amount
	0111	7'- 0-1-	24.00
	City State Calhoun LA	Zip Code 71225	21.90
	Calhoun LA	71225	Transaction ID: 0cb82453-f81b-4efb-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 24 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee	'	Date of Public Distribution/Dissemination
	Hannah J Landry		11 24 2014
	Mailing Address 1110 N Coolidge		Amount
	City State	Zip Code	95.00
	Gonzales LA	70737	Transaction ID: 9a10da14-8473-46ec-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date	554635.78	Disbursement For: Primary General 2014
	Per Election for Office Sought	334033.76	Other (specify) Runoff
			X Other (specify) ► Runoff
	Per Election for Office Sought		Other (specify) Runoff 116.90
	Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures		Other (specify) Runoff 116.90

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political

[Electronically Filed]

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05

Date

Signature

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	CHEDULE E (FEC Form 3X)		
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 285 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
_ Ch	neck if 24-hour report 48-hour report New report	ort Amends repor	t filed on Man / Dab / Yayayay
	Full Name of Payee Hannah J Landry		Date of Public Distribution/Dissemination
	Mailing Address 1110 N Coolidge		11 24 2014
			Amount
		Zip Code	24.00
	Gonzales LA	70737	Transaction ID : cdca09dc-7b4c-4925-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Mary C Lee		Date of Public Distribution/Dissemination
	Mailing Address 1030 N Coolidge Ave	_	11 24 2014 Amount
	City State	Zip Code	95.00
	Gonzales LA	70737	Transaction ID: 1a7fe480-2b08-4257-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		119.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

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S IT

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 286 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼
Women Speak Out PAC	
C	C00530766
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Date of Pomary C Lee	ublic Distribution/Dissemination
11	24 2014
Mailing Address 1030 N Coolidge Ave Amount	
City State Zip Code	24.00
Gonzales LA 70737 Transaction	in ID: b5d49896-f705-4e30-9 Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	24 / 2014
Name of Federal Candidate Support Office Sought:	House District:00
Ms. Mary L Landrieu Oppose President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo 2014 Other	or: Primary General r (specify) ▶ Runoff
	Public Distribution/Dissemination
Lilly Green	M / D D / Y Y Y Y Y Y 2014
Mailing Address 205 Medallion Circle Amount	
City State Zip Code	80.00
Shreveport LA 71119 Transactio	on ID : a95d4236-398f-4edd-8 Disbursement or Obligation
Purpose of Expenditure Category/ Category/	-
Type 001 11	
Name of Federal Candidate Support Office Sought:	House District:00
Ms. Mary L Landrieu President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2014	_ ,
Other	r (specify) ▶Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	104.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coop with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	

[Electronically Filed]

05

Date

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TEMIZED INDEPENDENT EXPENDIT	TURES			PAGE 287 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour rep	port New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Lilly Green			Date	of Public Distribution/Dissemination
,			[11 24 2014
Mailing Address 205 Medallion Circle			Amo	unt
City	State	Zip Code		69.60
Shreveport	LA	71119		action ID: 91fe457f-eb26-455f-8 of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002		11 24 2014
Name of Federal Candidate		Support	Office Soug	ht: House District: 00
Ms. Mary L Landrieu		X Oppose	Presid	dent X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme 2014	
Full Name of Payee				e of Public Distribution/Dissemination
Jennifer F Gilbert			[M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 180 McNeil Steep Hollow	Rd		Amo	punt
City	State	Zip Code		80.00
Carriere	MS	39426		saction ID: db12967c-6f71-4f57-a
Purpose of Expenditure Salary		Category/ Type 001] [M M / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Soug	ght: House District: 00
Ms. Mary L Landrieu		Oppose	Presid	dent X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disburseme	_ , _
				Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Ex	penditures		•	149.60
(b) SUBTOTAL of Unitemized Independent	Expenditures			
(-) TOTAL Indopendent Evpenditures				
(c) TOTAL Independent Expenditures			· •	7 7 7
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Ms. Emily Buchanan	[Electron	ically Filed]	M M /	18 2015
Signature		Date		2013

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 288 OF 320 FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00530766
M
of Public Distribution/Dissemination
11 24 2014
int
43.80
oction ID : 6f9a22eb-b49b-4583-b of Disbursement or Obligation
11 24 2014
nt: House District: 00
ent X Senate State: LA
nt For: Primary General
Other (specify) ▶Runoff
of Public Distribution/Dissemination
of Fublic Distribution/Dissemination
11 24 2014
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11
10.00 action ID : 6d221395-3ca3-462f-8 of Disbursement or Obligation
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10.00 action ID: 6d221395-3ca3-462f-8 of Disbursement or Obligation 11
10.00 action ID: 6d221395-3ca3-462f-8 of Disbursement or Obligation 11
10.00 action ID: 6d221395-3ca3-462f-8 of Disbursement or Obligation 11 124 2014 11 10.00 11 10.00 11 10.00 11 10.00 10 1
10.00 action ID: 6d221395-3ca3-462f-8 of Disbursement or Obligation 11 124 2014 11 10.00 11 10.00 11 10.00 11 10.00 10 1
10.00 action ID: 6d221395-3ca3-462f-8 of Disbursement or Obligation 11

Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Jennifer F Gilbert Mailing Address 180 McNeil Steep Hollow Rd Amou City State Zip Code MS Carriere 39426 Transa Date Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Preside Disbursemen Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Χo Full Name of Payee Date Eva M Johnston Mailing Address 2517 N 47th St Amou Zip Code City State Milwaukee WI 53210 Transa Date Purpose of Expenditure Category/ 001 Salary Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presid Disbursemer Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

Signature

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CHEDULE E (FEC Form 3X)		
EMIZED INDEPENDENT EXPENDITURES		PAGE 289 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New	report Amends repo	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Christopher Marquess		11 24 2014
Mailing Address 110 W Pecan St		Amount
City State	Zip Code	45.00
Ville Platte LA	70586	Transaction ID: b35f8234-cd67-4acb-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
Full Name of Payee Christopher Marquess		Date of Public Distribution/Dissemination
Mailing Address 110 W Pecan St		11 24 2014 Amount
City State	Zip Code	32.70
Ville Platte LA	70586	Transaction ID: 70f463cf-2f35-426a-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 24 7 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		77.70
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		· · · · · · · · · · · · · · · · · · ·
Under penalty of perjury I certify that the independent expendituwith, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

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Date

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Signature

SCHEDULE E (FEC Form 3X)

CHEDOLL L (FLC FOIII 3X)		
TEMIZED INDEPENDENT EXPENDITURES		PAGE 290 OF 320 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends repor	t filed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Felicia A Jones		Date of Public Distribution/Dissemination
Mailing Address 4106 Martha St		Amount
City State	Zip Code	80.00
Shreveport LA	71109	Transaction ID : 54b6ed7d-f605-45a4-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 24 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	Support Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
200		
Full Name of Payee Felicia A Jones		Date of Public Distribution/Dissemination
Mailing Address 4106 Martha St		Amount 24 2014
<u> </u>		
City State	Zip Code	9.30
Shreveport LA	71109	Transaction ID: 97fe0322-9abb-4dc4-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
Name of Federal Candidate	Support	Office Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		89.30
(b) SUBTOTAL of Unitemized Independent Expenditures		• I AND I AND I AND I
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015

Date

	PAGE FOR L	291 INE 24	OF OF F	320 ORM 3X	
DI	ENTIFI	CATIO	N NUM	IBER ▼	

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	port Amends report file	ed on M M / D D / Y Y Y Y Y
Full Name of Payee Bobbie M Steinsholt		Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 3009 Skelly St		Amount
City	Zin Codo	00.00
City State Shreveport LA	Zip Code 71107	60.00 Transaction ID : 0c5fecc0-dc20-487d-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
Name of Federal Candidate	Support Offi	ice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	Dis 201	bursement For: Primary General 4
Full Name of Payee Maegan E McDaniel		Date of Public Distribution/Dissemination
Mailing Address 3009 Skelly St		Amount
City State	Zip Code	60.00
Shreveport LA	71107	Transaction ID: 653f8545-3b47-4aad-b Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
Name of Federal Candidate	Support Off	ice Sought: House District:00
Ms. Mary L Landrieu	Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 20	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures		120.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	>	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	nically Filed] Date	05 18 2015
Signature	_	

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 292 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	oort Amends repo	ort filed on
	Full Name of Payee Maegan E McDaniel		Date of Public Distribution/Dissemination
	Mailing Address 3009 Skelly St		11 24 2014
	3009 Skelly St		Amount
	City State Shreveport LA	Zip Code 71107	22.50 Transaction ID : d6269d1b-553f-4799-8
	Purpose of Expenditure	1	Date of Disbursement or Obligation
	Mileage	Category/ Type 002	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Francis Richardson		11 24 2014
	Mailing Address 220 Doucet Rd		Amount
	City State	Zip Code	35.00
	Lafayette LA	70503	Transaction ID: 629dada0-c197-497b-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014
	(a) SUBTOTAL of Itemized Independent Expenditures		> 57.50
	(b) SUBTOTAL of Unitemized Independent Expenditures		. •
	(c) TOTAL Independent Expenditures		· ·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 293 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on
	Full Name of Payee Francis Richardson		Date of Public Distribution/Dissemination
	Mailing Address		11 / 24 / 2014
	220 Doucet Rd		Amount
	City State	Zip Code	3.03
	Lafayette LA	70503	Transaction ID : 9621570b-64dc-44d0-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
	Full Name of Payee Christopher L Gilbert		Date of Public Distribution/Dissemination
	Mailing Address 55 Lovell Johnson Rd		Amount 24 2014
	City State	Zip Code	80.00
	Picayune MS	39466	Transaction ID: 0bd087d2-9f55-4461-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) OUDTOTAL of the size of hadron and at Free and the second		20.00
	(a) SUBTOTAL of Itemized Independent Expenditures		> 83.03
	(b) SUBTOTAL of Unitemized Independent Expenditures		>
	(c) TOTAL Independent Expenditures		· ·
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

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Date

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PAGE	294	OF	320
FOR L	INE 24	OF F	ORM 3X

			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC			C C00530766
Check if 24-hour report	48-hour report New report	ort Amends repor	t filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Christopher L Gilbert Mailing Address 55 Level Jaha			11 24 7 2014
55 Lovell John	son Rd		Amount
City	State	Zip Code	45.90
Picayune	MS	39466	Transaction ID: b3793af6-9793-45ca-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	11 24 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sou	ght	554635.78	Disbursement For:
Full Name of Payee Jessica R Resendiz			Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 9685 Paula St			Amount
City	State	Zip Code	70.00
Keithville	LA	71047	Transaction ID : 7b6585f2-1c72-40f0-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 24 7 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sou	ght	554635.78	Disbursement For: Primary General 2014 Runoff
(a) SUBTOTAL of Itemized Indep	pendent Expenditures		115.90
(b) SUBTOTAL of Uniternized Inc	dependent Expenditures		>
(c) TOTAL Independent Expendit	ures		•
	tion of, any candidate or authorized		not made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
Ms. Emily Buchanan	[Electroni	ically Filed] Date	05 18 2015
Signature		_	

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Ms. Emily Buchanan

Signature

	HEDULE E (FEC Form 3X)		
ΤΕ	MIZED INDEPENDENT EXPENDITURES		PAGE 295 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V۷	omen Speak Out PAC		C C00530766
Che	eck if 24-hour report 48-hour report New rep	port Amends repo	rt filed on
Т	Full Name of Payee		Date of Public Distribution/Dissemination
	Jessica R Resendiz		11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 9685 Paula St		Amount
ŀ	City State	Zip Code	24.60
	Keithville LA	71047	Transaction ID : cac6b581-a0b4-4eba-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 24 2014
ŀ	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff
ľ	Full Name of Payee		Date of Public Distribution/Dissemination
	Alice K Salazar		11 24 2014
	Mailing Address 605 W Houston St		Amount
ŀ	City State	Zip Code	40.00
	Marshall TX	75633	Transaction ID: 4265716e-01e8-40d6-9 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
ŀ	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
ı	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
(a) SUBTOTAL of Itemized Independent Expenditures		64.60
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		·
١	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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NAME OF COMMITTEE (In Full) Women Speak Out PAC

PAGE 296 OF 320
FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
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53.70 ction ID : 31b817fc-76dd-45ad-8 of Disbursement or Obligation
11 24 / 2014
t: House District: 00
ent X Senate State: LA
t For: Primary General
ther (specify) ▶ Runoff
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of Public Distribution/Dissemination 11 24 2014 int 60.00 action ID : 1db13336-1581-4c08-9
of Public Distribution/Dissemination 11

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Full N	lame of Payee				Date of Public Distribution/Dissemination
	e K Salazar				11 24 2014
Mailin	g Address 605 W Houston St				Amount
City		State	Zip Code		53.70
1 '			•		
Marsh	nall se of Expenditure	TX	75633		Transaction ID: 31b817fc-76dd-45ad-8 Date of Disbursement or Obligation
Milea			Category/ Type 002		11 24 2014
Name	of Federal Candidate		Support	Office	e Sought: House District:00
Ms. M	lary L Landrieu		X Oppose		President Senate State: LA
	Calendar Year-To-Date			Disbu	ursement For: Primary General
	Per Election for Office Sought		554635.78	2014	
Full N	lame of Payee				Date of Public Distribution/Dissemination
Tay	/lor De Julian-Hernandez				11 24 2014
Mailin	ng Address 284 Cr 1401				Amount
0::		0	7. 0.1		00.00
City Carth	200	State TX	Zip Code 75633		60.00 Transaction ID : 1db13336-1581-4c08-9
			70000		Date of Disbursement or Obligation
Purpo Salar	ose of Expenditure Y		Category/ Type 001		11 24 7 2014
Name	e of Federal Candidate		Support	Office	e Sought: House District: 00
Ms. N	Mary L Landrieu		Oppose		President State: LA
	Calendar Year-To-Date		55 4005 70		ursement For: Primary General
F	Per Election for Office Sought		554635.78	2014	Y Other (specify) ►Runoff
(a) SU	BTOTAL of Itemized Independent E	xpenditures		. ▶	113.70
(b) SU	BTOTAL of Unitemized Independent	Expenditures		. •	
(c) TO	TAL Independent Expenditures			•	
with, or		y candidate or authorized			ade in cooperation, consultation, or concert rr, or (if the reporting entity is not a political
	Ms. Emily Buchanan	[Electroni	ically Filed] Date	M 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Women Speak Out PAC					
Check if 24-hour report 48-hour report New report	ort Amends report	filed on M M / D D / Y Y Y Y Y			
Full Name of Payee		Date of Public Distribution/Dissemination			
Gregory Green		11 24 2014			
Mailing Address 2506 Bolch Street		Amount			
City State	Zip Code	80.00			
Shreveport LA	71104	Transaction ID : ea5ad6fa-7b70-483e-8 Date of Disbursement or Obligation			
Purpose of Expenditure Salary	Category/ Type 001	11 24 / 2014			
Name of Federal Candidate	Support	Office Sought: House District: 00			
Ms. Mary L Landrieu	X Oppose	President Senate State: LA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014			
Full Name of Payee		Date of Public Distribution/Dissemination			
Gregory Green		11 24 2014			
Mailing Address 2506 Bolch Street		Amount			
City State Shreveport LA	Zip Code 71104	53.40 Transaction ID : 25a0cf31-4cc4-4dc6-9			
Purpose of Expenditure	Category/	Date of Disbursement or Obligation			
Mileage	Type 002	11 24 2014			
Name of Federal Candidate	Support	Office Sought: House District:00			
Ms. Mary L Landrieu	X Oppose	President State: LA			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2014 Runoff			
(a) SUBTOTAL of Itemized Independent Expenditures		133.40			
(b) SUBTOTAL of Unitemized Independent Expenditures		·			
(c) TOTAL Independent Expenditures		•			
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
Ms. Emily Buchanan [Electroni	cally Filed]	05 18 2015			
Signature	Date	2010			

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 298 OF 320
			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
V	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Hilary Townsend		11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 4506 US Hwy 79 North		Amount
	City State	Zip Code	60.00
	Deberry TX	75639	Transaction ID : 2e0b3979-826e-4255-a Date of Disbursement or Obligation
	Purpose of Expenditure	Category/	M = M / D = D / Y = Y = Y
	Salary	Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶ Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Ana L Esquivel		11 24 2014
	Mailing Address 284 Cr 1401		11 24 2014
	204 01 1401		Amount
	City State	Zip Code	60.00
	Carthage TX	75633	Transaction ID: 2b14f8cd-f845-4fc6-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ 001	11 24 2014
		Type	
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date		Disbursement For: Primary General
	Per Election for Office Sought	554635.78	2014
	1		
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 120.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		
			7 7
	(c) TOTAL Independent Expenditures		
			4 4
	Under penalty of perjury I certify that the independent expenditures	reported herein were	not made in cooperation, consultation, or concert
	with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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S

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
ΓE	EMIZED INDEPENDENT EXPENDITURES		PAGE 299 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	t Amends repo	rt filed on
	Full Name of Payee Lesley Lennox		Date of Public Distribution/Dissemination
	Mailing Address 2305 Cleary Ave		11 24 2014
	2000 Oldary Ave		Amount
	City State Zi	ip Code	10.00
		70001	Transaction ID: bcfbb1a2-3691-440f-a Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Lesley Lennox		11 24 2014
	Mailing Address 2305 Cleary Ave		Amount
	City State Z	ip Code	0.90
		70001	Transaction ID : 7cef0a9f-0127-40d9-b Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 Runoff Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		10.90
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		>
	Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized c party committee) any political party committee or its agent.		

[Electronically Filed]

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Date

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party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
	EMIZED INDEPENDENT EXPENDITURES		PAGE 300 OF 320
			FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
٧	Vomen Speak Out PAC		C C00530766
Ch	neck if 24-hour report 48-hour report New report	ort Amends repo	rt filed on
	Full Name of Payee Joneisha Stewart		Date of Public Distribution/Dissemination
	Mailing Address 2329 Runnymede Dr		Amount
	City	Zin Codo	60.00
	City State Marrero LA	Zip Code 70072	Transaction ID : 0bb33f23-8811-4219-b
	Marrero	70072	Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 7 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) ► Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Joneisha Stewart Mailing Address 2220 Burgarana de Ba		11 24 2014
	2329 Runnymede Dr		Amount
	City State	Zip Code	7.50
	Marrero LA	70072	Transaction ID : 4c90f00a-6b51-4063-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District:00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014 ✓ Other (specify) Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		
	(b) SUBTOTAL of Unitemized Independent Expenditures		·
	(c) TOTAL Independent Expenditures		>

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political

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2015

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Date

	PAGE 301 OF 320 FOR LINE 24 OF FORM 3X
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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayay
Full Name of Payee	Date of Public Distribution/Dissemination
Julia Perry	11 24 2014
Mailing Address 2046 Perrin St Apt C	Amount
City State Zip Code	100.00
Shreveport LA 71101	Transaction ID : ee32281d-8bef-481d-9
Sillevepoit	Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Colonday Voor To Pote	Sbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 554635.78 Dis	
Full Name of Payee Julia Perry	Date of Public Distribution/Dissemination
Mailing Address	11 24 2014
Mailing Address 2046 Perrin St Apt C	Amount
City State Zip Code	13.50
Shreveport LA 71101	Transaction ID : 25625908-c0d2-4249-8
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Mileage Category 7	11 24 2014
Name of Federal Candidate Support Off	fice Sought: House District: 00
Ms. Mary L Landrieu	President State: LA
Calendar Year-To-Date Dis	sbursement For: Primary General
Per Election for Office Sought 554635.78 20	Other (specify) P Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	113.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	M
Signature Date	10 2010

		2 OF 320 24 OF FORM 3X
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11 M	24	2014
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saction I		60.00 6-1915-4627-a
ght:	House	District: 00
- L	X Senate	State: LA
ent For:	Prima	ry General
Out- (
Otner (s	pecify) 🕨	Runoff
	pecify) ► lic Distribution	Runoff on/Dissemination
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e of Publ	lic Distributio	on/Dissemination
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11 11 Dunt saction I	D: f3086579	19.20 5-46ed-491d-a r Obligation / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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saction I e of Disc many many many many many many many many	D: f3086575 D: f3086575 Dursement or House Senate Prima	19.20 5-46ed-491d-a r Obligation / 2014 District: 00 State: LA ary General Runoff
saction I e of Disc many many many many many many many many	D: f3086575 D: f3086575 Dursement or House Senate Prima	19.20 5-46ed-491d-a r Obligation / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
saction I e of Disc many many many many many many many many	D: f3086575 D: f3086575 Dursement or House Senate Prima	19.20 5-46ed-491d-a r Obligation / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

NAME OF COMMITTEE (In Full) Women Speak Out PAC Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date Zachary Vidrine Mailing Address 202 Rue Des Cajun Amo City State Zip Code LA Ville Platte 70586 Trans Date Purpose of Expenditure Category/ Salary 001 Type Name of Federal Candidate Support Office Soud Ms. Mary L Landrieu Oppose Presi Disburseme Calendar Year-To-Date 2014 554635.78 Per Election for Office Sought Full Name of Payee Date Zachary Vidrine Mailing Address 202 Rue Des Cajun Amo City State Zip Code Ville Platte LA 70586 Trans Date Purpose of Expenditure Category/ Mileage 002 Type Name of Federal Candidate Support Office Sough Ms. Mary L Landrieu Oppose Presi Disburseme Calendar Year-To-Date 554635.78 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date Signature

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Ms. Emily Buchanan

Signature

	CHEDULE E (FEC Form 3X)		
11	EMIZED INDEPENDENT EXPENDITURES		PAGE 303 OF 320 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
Cł	neck if 24-hour report 48-hour report New report	port Amends repo	ort filed on
	Full Name of Payee Heather Ainsworth		Date of Public Distribution/Dissemination
	Mailing Address 9685 Paula St		11 24 2014 Amount
	City State Keithville LA	Zip Code 71047	80.00 Transaction ID: 6ec9e728-4732-4eb3-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Heather Ainsworth Mailing Address 9685 Paula St		Date of Public Distribution/Dissemination 11
	City State	Zip Code	54.30
	Keithville LA	71047	Transaction ID: 8b4aa129-519e-48ff-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		> 134.30
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		-
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		

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Date

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MIZED INDEPENDENT EXPENDIT	URES				PAGE 304	
ME OF COMMITTEE (In Full)					FOR LINE	24 OF FORM 3
/omen Speak Out PAC				FEC	IDENTIFICAT	ION NUMBER 1
romen opeak out i no				C	C00530766	
eck if 24-hour report 48-hour rep	port New	report Amends repo	ort filed	on M M	/ D D /	Y Y Y
Full Name of Payee				Date of Pub	olic Distribution	n/Dissemination
Elvis Spears				M M M	/ D D 24	2014
Mailing Address 2150 Hope St				Amount		
City	State	Zip Code				80.00
New Orleans	LA	70119			ID: 0e78af70 bursement or	
Purpose of Expenditure Salary		Category/ Type 001		11	24	2014
Name of Federal Candidate		Support	Office	Sought:	House	District: 00
Ms. Mary L Landrieu		Oppose		President	X Senate	State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbu 2014	rsement For:		y Genera Runoff
Full Name of Payee						n/Dissemination
Elvis Spears				M = M	/ D D	Y
Mailing Address 2150 Hope St				11 Amount	24	2014
				7 tillount		
City	State	Zip Code				15.60
New Orleans	LA	70119			ID: 9e127a43 bursement or	
Purpose of Expenditure Mileage		Category/ Type 002		M M M 11	24	2014
Name of Federal Candidate						00
		Support	Office	Sought:	House	District: 00
Ms. Mary L Landrieu		X Oppose		President	X Senate	State: LA
Calendar Year-To-Date		55,4005,70		ırsement For:	Primar	g Gener
Per Election for Office Sought		554635.78	2014	X Other (specify) ►	Runoff
a) SUBTOTAL of Itemized Independent Ex	penditures		▶		7	95.60
b) SUBTOTAL of Unitemized Independent	Expenditures		▶		7	
c) TOTAL Independent Expenditures			▶		7- 1-7-	
Under penalty of perjury I certify that the in with, or at the request or suggestion of, any party committee) any political party committee	candidate or authori	•				

Unde with, party

Ms. Emily Buchanan	[Electronically Filed]	Date	05	/	18	/	2015
Signature							

Check if

City

Winchester

Salary

NAME OF COMMITTEE (In Full) Women Speak Out PAC

> Full Name of Payee Cynthia N Schmit

Purpose of Expenditure

Ms. Mary L Landrieu

Full Name of Payee ERIC TABARY

Purpose of Expenditure

Ms. Mary L Landrieu

Signature

Name of Federal Candidate

Calendar Year-To-Date

Per Election for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures.....

(b) SUBTOTAL of Unitemized Independent Expenditures

Mailing Address

City

METAIRIE

Salary

Name of Federal Candidate

Calendar Year-To-Date

Per Election for Office Sought

6101 NORA ST

Mailing Address

24-hour report

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

2226 Taft Circle Apt 1

48-hour report

New report

Zip Code

Category/

554635.78

Zip Code

Category/

Type

554635.78

70003

Type

22601

State

VA

State

LA

		PAGE 305 OF 320 FOR LINE 24 OF FORM 3X
		FEC IDENTIFICATION NUMBER ▼
		C C00530766
Amends repor	rt filed	d on Mam / Dab / Yayayay
		Date of Public Distribution/Dissemination
		11 24 7 2014
		Amount
e		12.50 Transaction ID: 62555975-fbee-41a6-9 Date of Disbursement or Obligation
ory/ vpe 001		11 / 24 / 2014
Support	Office	te Sought: House District: 00
Oppose		President X Senate State: LA
5.78	Disbu 2014	oursement For: Primary General A Other (specify) ▶ Runoff
<u> </u>		Date of Public Distribution/Dissemination
		11 24 2014
		Amount
e		60.00 Transaction ID : f1a83f40-8f9c-4f27-8 Date of Disbursement or Obligation
ory/ vpe 001		11 24 7 2014
Support	Offic	ce Sought: House District: 00
Oppose		President Senate State: LA
5.78	Disb	
-		X Other (specify) ► Runoff
	•	72.50
	•	
	•	

(c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Ms. Emily Buchanan [Electronically Filed] 05 18 2015 Date

PAGE 306 OF 320 FOR LINE 24 OF FORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
ERIC TABARY	11 24 2014
Mailing Address 6101 NORA ST	Amount
City State Zip Code	2.70
METAIRIE LA 70003	Transaction ID: 256793c6-33cf-40f6-8 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 24 2014
Name of Federal Candidate Support Office	e Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For: Primary General Nother (specify) ► Runoff
Full Name of Davis	(-1
Full Name of Payee Jeanne Tribou	Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 22369 Ponderosa Dr.	Amount
City State Zip Code	40.00
Mandeville LA 70471	Transaction ID : eac82a79-f34c-4f40-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 24 2014
Name of Federal Candidate Support Offic	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General X Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	42.70
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

PAGE	307	OF	320 DRM 3X
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	oort Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Jeanne Tribou Mailing Address 22260 Penderses Dr		11 24 2014
22369 Ponderosa Dr.		Amount
City State	Zip Code	9.30
Mandeville LA	70471	Transaction ID : 8273f72c-5d23-42eb-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 / 24 / 2014
Name of Federal Candidate	Support Offi	ce Sought: House District:00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	bursement For: Primary General Variable Sequence
Full Name of Payee Cathy Longtin		Date of Public Distribution/Dissemination
Mailing Address 827 Navavre Ave		11 24 2014 Amount
City State	Zip Code	80.00
New Orleans LA Purpose of Expenditure	70124	Transaction ID: b0b4d9cc-8df4-46b9-b Date of Disbursement or Obligation
Salary	Category/ Type 001	11 24 2014
Name of Federal Candidate	Support Offi	ice Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 20°	bursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		89.30
(b) SUPTOTAL of Uniterpized Independent Expanditures		
(b) SUBTOTAL of Unitemized Independent Expenditures	•	7 7 7
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed] Date	05 18 2015
Signature		

Check if

NAME OF COMMITTEE (In Full) Women Speak Out PAC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

MIZED INDEPENDENT EXPENDITURES	S		PAGE 308 OF 320 FOR LINE 24 OF FORM 3X
ME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
omen Speak Out PAC			C C00530766
ck if 24-hour report 48-hour report	New re	port Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee			Date of Public Distribution/Dissemination
Cathy Longtin			11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 827 Navavre Ave			Amount
Dity	State	Zip Code	9.90
New Orleans	LA	70124	Transaction ID: 642b6e41-3613-499d-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage		Category/ Type 002	M 11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
lame of Federal Candidate		Support Off	ice Sought: House District: 00
/Is. Mary L Landrieu		X Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	77	554635.78 Dis 201	bursement For: Primary General Other (specify) Runoff
Full Name of Payee		'	Date of Public Distribution/Dissemination
Theresa a Youngblood			11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 102 S Main Street Apt A2			Amount
Dity	State	Zip Code	65.00
	VA	22611	Transaction ID: 2b3ee75d-442f-4cb8-8 Date of Disbursement or Obligation
Berryville Purpose of Expenditure	VA	Category/ Type 001	
Berryville Turpose of Expenditure Salary	VA	Category/ Type 001	Date of Disbursement or Obligation
Berryville Purpose of Expenditure Salary Name of Federal Candidate	VA	Category/ Type 001	Date of Disbursement or Obligation
Berryville Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought	VA	Category/ Type 001 Support Off Oppose	Date of Disbursement or Obligation 11
Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date	7 1 7	Category/ Type 001 Support Off Oppose Dis 20	Date of Disbursement or Obligation 11
Purpose of Expenditure Salary Name of Federal Candidate Ms. Mary L Landrieu Calendar Year-To-Date Per Election for Office Sought	ires	Category/ Type 001 Support Off Oppose Dis 20	Date of Disbursement or Obligation 11

Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	1	18	/	2015
Signature							
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party committee) any political party committee or its agent.

Ms. Emily Buchanan

Signature

SCHEDULE E (FEC Form 3X)			
EMIZED INDEPENDENT EXPENDITUR	RES		PAGE 309 OF 320 FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)			
Women Speak Out PAC			FEC IDENTIFICATION NUMBER ▼ C C00530766
heck if 24-hour report 48-hour report	New	report Amends repo	rt filed on
	New	Teport Amerius Tepo	it lied on
Full Name of Payee Francesca Blom			Date of Public Distribution/Dissemination
Mailing Address 101 Asbury Ct			Amount
City	State	Zip Code	92.50
Winchester	VA	22602	Transaction ID: 44cc280c-ac98-4f15-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 24 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	,	554635.78	Disbursement For: Primary General 2014
Full Name of Payee Evelyn Lesaicherre			Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 629 Radiance Ave			Amount
City	State	Zip Code	80.00
Metairie	LA	70001	Transaction ID: 5b749f2a-f90e-465d-8 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 24 2014
Name of Federal Candidate		Support	Office Sought: House District:00
Ms. Mary L Landrieu		Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
(a) SUBTOTAL of Itemized Independent Expendent	ditures		. ▶ 172.50
(b) SUBTOTAL of Unitemized Independent Expenses	enditures		• • • • • • • • • • • • • • • • • • •
(c) TOTAL Independent Expenditures			>
			not made in cooperation, consultation, or concert f either, or (if the reporting entity is not a political

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Date

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NAME OF COMMITTEE (In Full)

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FEC IDENTIFICATION NUMBER ▼							
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11	/	24	/	2014			
nt							
				5.40			
of Dis	ID :	ement c	81-c	ed0-4854-a bligation			
11	/	24	/	2014			
ıt:		House	[District: 00			
ent	X	Senate		State: LA			
t For:		Prim	ary	General			
ther (spec	cify) 🕨 _		Runoff			
	olic I		ion/l	Dissemination			
11	/	24	/	2014			
ınt							
				80.00			
ction		278b8fa		Ifdb-4ab4-a bligation			
11	/	24	/	2014			
nt:		House	[District: 00			
ent	X	Senate		State:LA			
nt For:		Prim	ary	General			
other (spe	cify) 🕨 _		Runoff			

Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Evelyn Lesaicherre	11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 629 Radiance Ave	Amount
City State Zip Code	5.40
Metairie LA 70001	Transaction ID : 5aa0ea81-ced0-4854-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 24 / 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For: Primary General A Other (specify) ► Runoff
Full Name of Payee	Date of Public Distribution/Dissemination
Carl Brent	11 24 2014
Mailing Address 6718 Lake Willow Dr	Amount
City State Zip Code	80.00
New Orleans LA 70126	Transaction ID : 278b8fa4-dfdb-4ab4-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For: Primary General Other (specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	85.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

PAGE	311	OF	
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report Amends report filed	d on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Carl Brent	11 D D / Y Y Y Y Y Y 2014
Mailing Address 6718 Lake Willow Dr	Amount
City State Zip Code	14.40
New Orleans LA 70126	Transaction ID : 4aac07bc-2ef7-4823-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	11 24 / 2014
Name of Federal Candidate Support Offic	ce Sought: House District:00
Ms. Mary L Landrieu Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General
Full Name of Days	
Full Name of Payee Joshua J Huffman	Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 211 Dixie Ave	Amount
City State Zip Code	60.00
Harrisonburg VA 22801	Transaction ID : 16b2cf89-09f7-4a48-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	11 24 2014
Name of Federal Candidate Support Offic	ce Sought: House District: 00
Ms. Mary L Landrieu Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	74.40
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed] Date	05 18 2015
Signature	

Signature

TEMIZED INDEPENDENT EXPENDITURI	ES			PAGE 312 OF 320
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC				C C00530766
Check if 24-hour report 48-hour report	New re	report Amends repo		M / D = D / Y = Y = Y
Full Name of Payee Christine Stevens	7			of Public Distribution/Dissemination
Mailing Address 100 Asbury Ct			Amour	11 24 2014 nt
City	State	Zip Code		70.00
Winchester	VA	22602		ction ID: 0722208b-5017-4391-a of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	М	11 24 2014
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement 2014	For: Primary General Runoff
Full Name of Payee Jazmine d Conner Mailing Address 100 ASBURY CT				of Public Distribution/Dissemination
TOU AGBOILT OT			Amou	nt
City	State	Zip Code		70.00
WINCHESTER	VA	22602		ction ID: a89fd75b-100e-40bf-a of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001		11 24 2014
Name of Federal Candidate		Support	Office Sough	t: House District: 00
Ms. Mary L Landrieu		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursemen 2014	t For:
(a) SUBTOTAL of Itemized Independent Expendi	tures		.	140.00
(b) SUBTOTAL of Unitemized Independent Exper	nditures		· •	
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authoriz			
Ms. Emily Buchanan	[Electr	ronically Filed] Date	M M / / 05	18 2015

Date

Signature

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	CHEDULE E (FEC Form 3X)		
Tt	EMIZED INDEPENDENT EXPENDITURES		PAGE 313 OF 320 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
۷	Vomen Speak Out PAC		C C00530766
_ Ch	neck if 24-hour report 48-hour report New rep	port Amends repo	ort filed on
_	Full Name of Payee		Date of Public Distribution/Dissemination
	Jon E Conner		11 / 24 / 2014
	Mailing Address 100 Asbury Ct		Amount
	City State	Zip Code	70.00
	Winchester VA	22602	Transaction ID : 548197c4-325d-4623-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	Full Name of Payee Rodney O Culbreath		Date of Public Distribution/Dissemination
	Mailing Address 100 Asbury Ct		Amount
	City State	Zip Code	70.00
	Winchester VA	22602	Transaction ID: b191ac49-d2ac-4a76-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 24 2014
	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For:
	(a) SUBTOTAL of Itemized Independent Expenditures		140.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		-
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Ms. Emily Buchanan		M M / D D / Y Y Y

[Electronically Filed]

05

Date

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SCHEDU **ITEMIZED**

IIZED INDEPENDENT EXPENDITU	RES		PAGE 314 OF 320 FOR LINE 24 OF FORM 3
E OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER
omen Speak Out PAC			C C00530766
k if 24-hour report 48-hour repor	t New	report Amends repo	ort filed on
Full Name of Payee			Date of Public Distribution/Dissemination
Rodney D Culbreth			11 24 2014
Mailing Address 100 Asbury CT			Amount
3200 Dam Neck Rd			
Dity Africa Control	State VA	Zip Code	70.00
Vinchester	VA	22602	Transaction ID: 7f050760-a2b5-4ec4-a Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President X Senate State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
Mailing Address 100 Asbury Ct			11 / 24 / 2014 Y
City	State	Zip Code	70.00
Winchester	VA	22602	Transaction ID : cca6c496-3a2e-4c30-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary		Category/ Type 001	11 24 7 2014
Name of Federal Candidate		Support	Office Sought: House District: 00
Ms. Mary L Landrieu		Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014
) SUBTOTAL of Itemized Independent Exper	nditures		140.00
) SUBTOTAL of Unitemized Independent Ex	penditures		•
) TOTAL Independent Expenditures			

Ms. Emily Buchanan [Electronically Filed] 2015 05 18 Date Signature

PAGE	315	OF	
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
Check if 24-hour report 48-hour report New report An	mends report filed on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Brieshauna M Stevens Mailing Address 4703 Terroy Bines Ct	11 / 24 / 2014
1703 Torrey Pines Ct	Amount
City State Zip Code	60.00
Reston VA 20190	Transaction ID : e66e44a3-36dc-420b-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.7	Disbursement For: Primary General 2014
Full Name of Payee	
Laura U Logie	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2565 Shire Circle	Amount
City State Zip Code	30.00
Harrisonburg VA 22801	Transaction ID : 5692efae-f1c1-430c-a Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type	
Name of Federal Candidate	Support Office Sought: House District: 00
Ms. Mary L Landrieu	Oppose President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 554635.7	Disbursement For: Primary General 2014 Cher (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	90.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF OTHERHIZED INDEPENDENT EXPENDITURES	<u> </u>
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported he with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	
Ms. Emily Buchanan [Electronically Filed]	Date 05 18 2015
Signature	

PAGE	316	OF	320		
FOR L	INE 24	OF F	ORM 3X		
ENTIFICATION NUMBER ▼					

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report	Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
Helen Celestine Mailing Address 28246 Ouise Rd		11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
38346 Quinn Rd		Amount
City State Zip	Code	20.00
	452	Transaction ID : e2e3c418-550e-41ce-9 Date of Disbursement or Obligation
Purpose of Expenditure Salary Ca	ategory/ Type 001	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District:00
Ms. Mary L Landrieu	X Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 55	Disbu 2014	rsement For:
Full Name of Payee		
Helen Celestine		Date of Public Distribution/Dissemination 11 24 2014
Mailing Address 38346 Quinn Rd		Amount
City State Zip	Code	4.50
Pearl River LA 70	452	Transaction ID: a8b98bf7-5bcb-4cc1-9 Date of Disbursement or Obligation
Purpose of Expenditure Mileage Ca	ategory/ Type 002	11 24 2014
Name of Federal Candidate	Support Office	e Sought: House District: 00
Ms. Mary L Landrieu	X Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought 5	Disbu 2014	rrsement For: Primary General Other (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	·····	24.50
(b) SUBTOTAL of Unitemized Independent Expenditures		
		75 75 75
(c) TOTAL Independent Expenditures	·····	7 7 7
Under penalty of perjury I certify that the independent expenditures reposit, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electronically	y Filed] Date 0	5 18 2015
Signature	- 310	

PAGE	317	OF	320 DRM 3X
FOR L	INE 24	OF F	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New rep	oort Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Amanda Boley Mailing Address		11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Split Oak Drive		Amount
City State	Zip Code	85.00
charlotte NC	28227	Transaction ID : 538ecdfd-137e-4047-a Date of Disbursement or Obligation
Purpose of Expenditure Salary	Category/ Type 001	11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought: House District: 00
Ms. Mary L Landrieu	Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 201	bursement For: Primary General A Other (specify) ► Runoff
Full Name of Payee		
Amanda Boley		Date of Public Distribution/Dissemination 11 24 2014
Mailing Address Split Oak Drive		Amount
City State	Zip Code	19.23
charlotte NC	28227	Transaction ID: 3a450105-d28a-4e04-b Date of Disbursement or Obligation
Purpose of Expenditure Mileage	Category/ Type 002	11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Off	ice Sought: House District: 00
Ms. Mary L Landrieu	∑ Oppose	President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	554635.78 Dis 20	sbursement For: Primary General Nother (specify) ► Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		104.23
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures)	7 7
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Ms. Emily Buchanan [Electron	nically Filed]	05 18 2015
Signature		

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Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)		
TΕ	EMIZED INDEPENDENT EXPENDITURES		PAGE 318 OF 320 FOR LINE 24 OF FORM 3X
N/	AME OF COMMITTEE (In Full)		
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼
			C C00530766
Ch	neck if 24-hour report 48-hour report New rep	ort Amends repo	ort filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Lesley Lennox		11 22 7 2014
	Mailing Address 2305 Cleary Ave		Amount
	City State	Zip Code	57.50
	Metairie LA	70001	Transaction ID : 6d8ee469-d2c9-4041-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	11 22 2014
	Name of Federal Candidate		Office Sought: House District: 00
	Ms. Mary L Landrieu	Support	Office Godgin.
	Mo. Mary E Landilod	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Runoff
	Full Name of Payee		Date of Public Distribution/Dissemination
	Lesley Lennox		11 22 2014
	Mailing Address 2305 Cleary Ave		11 22 2014
	2303 Gleary Ave		Amount
	City State	Zip Code	3.90
	Metairie LA	70001	Transaction ID : cb909de3-969c-4a25-a Date of Disbursement or Obligation
	Purpose of Expenditure Mileage	Category/ Type 002	11 22 2014
	Name of Federal Candidate		
		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date	554635.78	Disbursement For: Primary General
	Per Election for Office Sought	334033.70	Other (specify) Runoff
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 61.40
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	CV - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		9 9 9
	(c) TOTAL Independent Expenditures		
			42 42 42
	History and the standard of th		
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		

[Electronically Filed]

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05

Date

S П

Ms. Emily Buchanan

Signature

36	CHEDULE E (FEC Form 3X)						
TE	EMIZED INDEPENDENT EXPENDITURES		PAGE 319 OF 320				
\I/	ME OF COMMITTEE (In Full)		FOR LINE 24 OF FORM 3X				
	Vomen Speak Out PAC		FEC IDENTIFICATION NUMBER ▼				
_	vomon opeak out i no		C C00530766				
Ch	eck if 24-hour report 48-hour report New re	eport Amends repo	ort filed on				
	Full Name of Payee		Date of Public Distribution/Dissemination				
	Colton R Overcash		11 24 2014				
	Mailing Address 121 Ohara Dr		Amount				
	City State	Zip Code	70.00				
	Salisbury NC	28147	Transaction ID : 0f705fca-b1c5-49b8-b Date of Disbursement or Obligation				
	Purpose of Expenditure	Category/	M M / D D / Y Y Y Y				
	Salary	Type 001	11 24 2014				
	Name of Federal Candidate	Support	Office Sought: House District: 00				
	Ms. Mary L Landrieu	Oppose	President X Senate State: LA				
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ► Runoff				
	Full Name of Payee Colton R Overcash		Date of Public Distribution/Dissemination 11				
	Mailing Address 121 Ohara Dr		Amount				
	City State	Zip Code	78.84				
	Salisbury NC	28147	Transaction ID: 7920c277-d391-4f35-9 Date of Disbursement or Obligation				
	Purpose of Expenditure Mileage	Category/ Type 002	11 24 7 2014				
	Name of Federal Candidate	Support	Office Sought: House District: 00				
	Ms. Mary L Landrieu	Oppose	President Senate State: LA				
	Calendar Year-To-Date Per Election for Office Sought	554635.78	Disbursement For: Primary General 2014				
			Mother (specify) ► Runoff				
	(a) SUBTOTAL of Itemized Independent Expenditures		▶ 148.84				
	(b) SUBTOTAL of Unitemized Independent Expenditures		· •				
	(c) TOTAL Independent Expenditures		•				
	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee or its agent						

[Electronically Filed]

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Date

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	age# 15951393429 CHEDULE E (FEC Form :	3 V)		
	MIZED INDEPENDENT EXPEN			PAGE 320 OF 320
				FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) Vomen Speak Out PAC			FEC IDENTIFICATION NUMBER ▼
V	vomen Speak Out PAC			C C00530766
Ch	eck if 24-hour report 48-hou	ur report New report	ort Amends repo	ort filed on
	Full Name of Payee Colton R Overcash			Date of Public Distribution/Dissemination
				11 23 2014
	Mailing Address 121 Ohara Dr			Amount
	City	State	Zip Code	90.00
	Salisbury	NC	28147	Transaction ID: 871d7b9c-8594-43e4-b Date of Disbursement or Obligation
	Purpose of Expenditure Salary		Category/ Type 001	11 23 2014
	Name of Federal Candidate		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	7	554635.78	Disbursement For: Primary General 2014
	Full Name of Payee Colton R Overcash			Date of Public Distribution/Dissemination
	Mailing Address 121 Ohara Dr			Amount
	City	State	Zip Code	60.60
	Salisbury	NC	28147	Transaction ID: 8c28a9f9-fbf6-4f96-8 Date of Disbursement or Obligation
	Purpose of Expenditure Mileage		Category/ Type 002	11 23 7 2014
	Name of Federal Candidate		Support	Office Sought: House District: 00
	Ms. Mary L Landrieu		X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought		554635.78	Disbursement For: Primary General 2014 Runoff
	(a) SUBTOTAL of Itemized Independen	nt Expenditures		▶ 150.60
	(b) SUBTOTAL of Unitemized Independent	dent Expenditures		. •
	(c) TOTAL Independent Expenditures			34162.77

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Ms. Emily Buchanan	[Electronically Filed]	Date	05	18	/	2015
Signature						
0.9						